| Fill in this information to ident | tify your case: |
|---|---|
| United States Bankruptcy Court for the: WESTERN DISTRICT OF TEXAS | |
| Case number (if known): | Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13 |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together--called a joint case--and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself

| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
|-----------------------|--|--|--|
| 1. Your | r full name | | |
| gove ident your | e the name that is on your ernment-issued picture tification (for example, driver's license or eport). | Walter First Name Dean Middle Name | Carol First Name Joan Middle Name |
| | | Marth | Marth |
| ident | g your picture tification to your meeting the trustee. | Last Name Suffix (Sr., Jr., II, III) | Last Name Suffix (Sr., Jr., II, III) |
| | other names you e used in the last 8 s | First Name | First Name |
| | de your married or den names. | Middle Name Last Name | Middle Name Last Name |
| your | the last 4 digits of Social Security | xxx - xx - <u>3</u> <u>9</u> <u>6</u> <u>6</u> | xxx - xx - <u>8</u> <u>0</u> <u>0</u> <u>4</u> |
| Indiv | ber or federal vidual Taxpayer | OR | OR |
| lden (ITIN | tification number I) | 9xx - xx | 9xx - xx |

| Deb ^o | tor 1 tor 2 | Walter Dean Marth Carol Joan Marth | | Case number (if known) |
|------------------|----------------|---|---|---|
| | | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 4. | and Er | usiness names mployer | ✓ I have not used any business names or E | INs. I have not used any business names or EINs. |
| | (EIN) y | ication Numbers rou have used in st 8 years | Business name | Business name |
| | | e trade names and | Business name | Business name |
| | doing t | ousiness as names | Business name | Business name |
| | | | EIN | EIN |
| | | | EIN | |
| 5. | Where | you live | | If Debtor 2 lives at a different address: |
| | | | 4800 Steiner Ranch Blvd #3106 | |
| | | | Number Street | Number Street |
| | | | | |
| | | | Austin TX 78732 | |
| | | | City State ZIP Code | City State ZIP Code |
| | | | TRAVIS County | County |
| | | | • | · |
| | | | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to you at this mailing address. |
| | | | Number Street | Number Street |
| | | | P.O. Box | P.O. Box |
| | | | City State ZIP Code | City State ZIP Code |
| 6. | | ou are choosing strict to file for | Check one: | Check one: |
| | bankrı | | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. |
| | | | I have another reason. Explain. (See 28 U.S.C. § 1408.) | I have another reason. Explain. (See 28 U.S.C. § 1408.) |
| Pa | art 2: | Tell the Court Ab | out Your Bankruptcy Case | |
| 7. | The ch | napter of the | Check one: (For a brief description of each, see | Notice Required by 11 U.S.C. § 342(b) for Individuals Filing |
| | | uptcy Code you oosing to file | for Bankruptcy (Form 2010)). Also, go to the top | of page 1 and check the appropriate box. |
| | under | ocomy to mo | Chapter 7 | |
| | | | Chapter 11 | |
| | | | Chapter 12 | |
| | | | Chapter 13 | |

| | walter Dean Mart otor 2 Carol Joan Marth | | Case number (if known) | | | | | |
|-----|---|----------|------------------------|---|-------------------------------|----------------------------------|---|--|
| 8. | How you will pay the fee | ✓ | cour pay | I pay the entire fee when I file my petition to for more details about how you may pay with cash, cashier's check, or money order alf, your attorney may pay with a credit care | . Typically, er. If your a | if you are pay ttorney is sub | ring the fee yourself, you may mitting your payment on your | |
| | | | | ed to pay the fee in installments. If you viduals to Pay The Filing Fee in Installmer | | | and attach the Application for | |
| | | | By la than fee i | I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. | | | | |
| 9. | Have you filed for bankruptcy within the | ✓ | N o | | | | | |
| | last 8 years? | | Yes. | | | | | |
| | | Di | strict _ | | _ When _ | | Case number | |
| | | Di | strict | | | | | |
| | | Di | _ | | _ VIIICII _ | M / DD / YYYY | Case number | |
| | | Di | strict _ | | When _ | M / DD / YYYY | Case number | |
| 10. | Are any bankruptcy | ✓ | No | | | , 22 , | | |
| | cases pending or being filed by a spouse who is | | Yes. | | | | | |
| | not filing this case with you, or by a business | De | ebtor _ | | | Relationsh | nip to you | |
| | partner, or by an | Di | strict | | | | Case number, | |
| | affiliate? | | _ | | | M / DD / YYYY | | |
| | | De | ebtor _ | | | Relationsh | nip to you | |
| | | Di | strict _ | | _ When _ | M / DD / YYYY | Case number,if known | |
| 11. | Do you rent your residence? | | No. Yes. | Go to line 12. Has your landlord obtained an eviction | judgment a | igainst you? | | |
| | | | | ✓ No. Go to line 12.✓ Yes. Fill out Initial Statement Abo and file it as part of this bankruptc | | on Judgment | Against You (Form 101A) | |

| | tor 1 tor 2 | Walter Dean Marth Carol Joan Marth | | | | Case numbe | r (if known) | | |
|-----------|---|--|-------------------------|---|--|--|---|---------------------------|----------------------------------|
| P | art 3: | Report About An | y Bı | ısine | sses You Own as a | a Sole Proprietor | | | |
| 12. | Are you a sole proprietor of any full- or part-time business? | | | | Go to Part 4. Name and location of b | usiness | | | |
| | busines individu separat | A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. | | | Name of business, if any Number Street | | | | |
| | sole pro | ave more than one oprietorship, use a e sheet and attach it etition. | | | Health Care Busin Single Asset Rea Stockbroker (as c | box to describe your businessness (as defined in 11 U.S.C. Il Estate (as defined in 11 U.S.C. § 101(53 er (as defined in 11 U.S.C. § 2 | . § 101(27A)) S.C. § 101(51B) A)) | ZIP Cod | de |
| 13. | Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor? | | can mos | set ap st recei | propriate deadlines. If you | the court must know whether you indicate that you are a sm nent of operations, cash-flow of exist, follow the procedure | nall business de statement, and | ebtor, you federal ind | must attach your come tax return |
| | | | $\overline{\mathbf{V}}$ | No. | I am not filing under C | hapter 11. | | | |
| | For a definition of small business debtor, see | | No. | I am filing under Chapt the Bankruptcy Code. | ter 11, but I am NOT a small I | business debto | or according | g to the definition in | |
| | 11 U.S.C. § 101(51D). | | | Yes. | I am filing under Chapt Bankruptcy Code. | ter 11 and I am a small busin | ess debtor acc | ording to th | ne definition in the |
| Pa | art 4: | Report If You Ov | vn oı | · Hav | e Any Hazardous F | Property or Any Prope | rty That Nee | eds Imm | ediate Attention |
| 14. [| Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable | | | No Yes. | What is the hazard? | | | | |
| | safety? any pro | to public health or Or do you own operty that needs ate attention? | | | If immediate attention | is needed, why is it needed? | | | |
| | perisha livestoc | mple, do you own ble goods, or k that must be fed, or ng that needs urgent | | | Where is the property? | Number Street | | | |
| | | | | | | City | | State | ZIP Code |

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

✓ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| credit counseling because of: | | | | |
|-------------------------------|--|--|--|--|
| ☐ Incapacity. | I have a mental illness or a mental deficiency that makes me | | | |

□ I am not required to receive a briefing about

incapable of realizing or making rational decisions about finances.

☐ **Disability.** My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I

Active duty. I am currently on active military duty in a military combat zone.

reasonably tried to do so.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case): You must check one:

✓ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing a | about |
|---|-------|
| credit counseling because of: | |

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Debtor 1 Walter Dean Marth Debtor 2 **Carol Joan Marth** Case number (if known) Part 6: **Answer These Questions for Reporting Purposes** 16. What kind of debts do you 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) have? as "incurred by an individual primarily for a personal, family, or household purpose." No. Go to line 16b. Yes. Go to line 17. $\overline{\mathbf{A}}$ 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. State the type of debts you owe that are not consumer or business debts. 17. Are you filing under Chapter 7? I am not filing under Chapter 7. Go to line 18. No. Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and Do you estimate that after any exempt property is administrative expenses are paid that funds will be available to distribute to unsecured creditors? excluded and **☑** No administrative expenses are paid that funds will be ☐ Yes available for distribution to unsecured creditors? 18. How many creditors do 1-49 1,000-5,000 25,001-50,000 you estimate that you 50-99 5,001-10,000 50,001-100,000 owe? 10,001-25,000 More than 100,000 100-199 200-999 19. How much do you \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion $\mathbf{\Lambda}$ estimate your assets to \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion be worth? \$100,001-\$500,000 П \$50,000,001-\$100 million \$10,000,000,001-\$50 billion \$500,001-\$1 million \$100,000,001-\$500 million П More than \$50 billion

П

\$1,000,001-\$10 million

\$10,000,001-\$50 million

\$50,000,001-\$100 million

\$100,000,001-\$500 million

\$500,000,001-\$1 billion

More than \$50 billion

П

П

\$1,000,000,001-\$10 billion

\$10,000,000,001-\$50 billion

20. How much do you

be?

estimate your liabilities to

\$0-\$50,000

 \square

\$50,001-\$100,000

\$100,001-\$500,000

\$500,001-\$1 million

Debtor 1 Walter Dean Marth
Debtor 2 Carol Joan Marth
Carol Joan Marth
Case number (if known)

Part 7:

Sign Below

For you

I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.

If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11, 12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.

If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

X /s/ Walter Dean Marth

X /s/ Carol Joan Marth

Walter Dean Marth, Debtor 1

Carol Joan Marth, Debtor 2

Executed on 02/04/2019

MM / DD / YYYY

Executed on <u>02/04/2019</u> MM / DD / YYYY

| Debtor 1 Debtor 2 | Walter Dean Marth Carol Joan Marth | | Case nun | nber (if know | n) | | |
|---|---------------------------------------|--|-----------------------|---------------------|---|--|--|
| For your a represente | ttorney, if you are ed by one | I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to | | | | | |
| If you are not represented by an attorney, you do not need to file this page. | | the debtor(s) the notice required certify that I have no knowledge is incorrect. | , , , | | which § 707(b)(4)(D) applies, e schedules filed with the petition | | |
| | | X /s/ Douglas J. Powell Signature of Attorney for Deb | otor | Date | 02/04/2019 MM / DD / YYYY | | |
| | | Douglas J. Powell Printed name The Law Offices of Doug | ılas J. Powell, P.C. | | | | |
| | | Firm Name 820 West 10th Street Number Street | | | | | |
| | | | | | | | |
| | | Austin City | | TX State | 78701 ZIP Code | | |
| | | Contact phone (512) 476-2 | 2457 Email add | dress dpow e | ell@dougpowelllaw.com | | |

TX State

16194900 Bar number

| Fil | II in this info | ormation to iden | tify your o | case and this filing: | | | | |
|--------|-------------------------------------|---|---|---|--------------------|---|----------------------------|-----------|
| De | btor 1 | Walter First Name | Dean Middle Name | Marth Last Name | _ | | | |
| De | btor 2 | Carol | Joan | Marth | | | | |
| (Sp | oouse, if filing) | First Name | Middle Name | Last Name | | | | |
| Un | ited States Bar | nkruptcy Court for the | : WESTER | N DISTRICT OF TEXAS | | | | |
| | se number known) | | | | | — | if this is an ed filing | |
| Off | icial Form | 106A/B | | | | | | |
| Scl | hedule A/ | B: Property | | | | | | 12/15 |
| filing | g together, bot et to this form. | th are equally respo On the top of any a | nsible for su additional pa | est. Be as complete and accur upplying correct information. uges, write your name and cas uilding, Land, or Other R | If more se numi | space is needed, attach a s ber (if known). Answer eve | separate ry question. | st In |
| 1. | ✓ No. Go to | | equitable in | terest in any residence, buildin | ng, land | d, or similar property? | | |
| | | • | - | or all of your entries from Part 1. Write that number here | | _ | | \$0.00 |
| Pa | ort 2: Des | scribe Your Vehi | cles | | | | | |
| - | | | - | rest in any vehicles, whether thicle, also report it on Schedule | - | _ | • | S |
| 3. | Cars, vans, tr | ucks, tractors, spor | t utility vehic | cles, motorcycles | | | | |
| | □ No ☑ Yes | | | | | | | |
| 3.1. | _ | l le come al mi | | has an interest in the propert | ty? | Do not deduct secured clai amount of any secured clai | | |
| Make | | Hyundai Sonata PHEV | | Debtor 1 only | | Creditors Who Have Claim | | |
| Year | | 2016 | | Debtor 2 only | | Current value of the entire property? | Current val | |
| Appr | oximate mileaç | ge: 66,000 | _ | Debtor 1 and Debtor 2 only At least one of the debtors and a | another | | • | 10,000.00 |
| | er information: | | | | | | | |
| 2010 | 6 Hyundai Sc | onata PHEV | | Check if this is community pro (see instructions) | operty | | | |
| 4. | | | | other recreational vehicles, ot ercraft, fishing vessels, snowmo | | | | |
| | ✓ No ☐ Yes | ,, , | , | , | , | , | | |
| 5. | | • | - | or all of your entries from Part 2. Write that number here | | _ | \$ | 10,000.00 |

Debtor 1 Walter Dean Marth Debtor 2 **Carol Joan Marth** Case number (if known) Part 3: **Describe Your Personal and Household Items** Current value of the Do you own or have any legal or equitable interest in any of the following items? portion you own? Do not deduct secured claims or exemptions. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware ☐ No Yes. Describe..... See continuation page(s). \$810.00 **Electronics** Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games Yes. Describe..... See continuation page(s). \$950.00 Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles **☑** No Yes. Describe..... Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments **☑** No Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment **☑** No Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories ☐ No Yes. Describe..... Clothing / Wearing Apparel for 2 adult(s) \$400.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, □ No Yes. Describe..... See continuation page(s). \$700.00 13. Non-farm animals Examples: Dogs, cats, birds, horses **☑** No ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list **☑** No ☐ Yes. Give specific 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have \$2,860.00 attached for Part 3. Write the number here.....

Debtor 1 Walter Dean Marth Debtor 2 **Carol Joan Marth** Case number (if known) Part 4: **Describe Your Financial Assets** Current value of the Do you own or have any legal or equitable interest in any of the following? portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your □ No \$350.00 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ☐ No **∀** Yes..... Institution name: 17.1. Checking account: \$1,047.43 Wells Fargo (Checking 1078848353) 17.2. Checking account: RBFCU (Checking 192140799) \$770.68 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts **☑** No Yes..... Institution or issuer name: 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture **☑** No Yes. Give specific information about Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. **☑** No ☐ Yes. Give specific information about them..... Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ☐ No Yes. List each account separately. Type of account: Institution name: Retirement account: **Retirement account TRA** Debtor 2 receives \$3231.95 monthly \$0.00 Retirement account: Retirement account for Debtor 1 Concordia Plan Services. \$0.00 Debtor 1 receives \$2288.82 monthly

| | tor 1 tor 2 | Walter Dean Marth Carol Joan Marth | Case number (if known) | |
|-----|----------------|--|---|---|
| 22. | Your sl | ity deposits and prepayments hare of all unused deposits you have made so that you may continules: Agreements with landlords, prepaid rent, public utilities (electionies, or others | | |
| | □ No | | | |
| | ☑ Ye | sInstitution name or individ | lual: | **** |
| | | Security deposit on rental unit: Landlord Deposit | | \$300.00 |
| 23. | ✓ No | | either for life or for a number of years) | |
| | _ | s | | |
| 24. | 26 U.S | sts in an education IRA, in an account in a qualified ABLE prog s.C. §§ 530(b)(1), 529A(b), and 529(b)(1). | gram, or under a qualified state tuition pro | ogram. |
| | ✓ No | os | v file the records of any interests 11 U.S.C. | 8 521(c) |
| 25. | Trusts | s, equitable or future interests in property (other than anything s exercisable for your benefit | | . 3 021(0) |
| | _ | os. Give specific ormation about them | | |
| 26. | | ts, copyrights, trademarks, trade secrets, and other intellectual les: Internet domain names, websites, proceeds from royalties are | | |
| | | o es. Give specific ormation about them | | |
| 27. | | ses, franchises, and other general intangibles oles: Building permits, exclusive licenses, cooperative association | ı holdings, liquor licenses, professional licen | ses |
| | | os. Give specific ormation about them | | |
| Mor | ey or p | property owed to you? | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 28. | Tax re | funds owed to you | | |
| | ✓ No | es. Give specific information | Federa | l: |
| | | out them, including whether u already filed the returns | State: | |
| | • | d the tax years | Local: | |
| 29. | | r support oles: Past due or lump sum alimony, spousal support, child suppo | | v settlement |
| | ✓ No | | n, maintenance, arverse seasoment, propert | y comoment |
| | ست | es. Give specific information | Alimony: | |
| | | | Maintenance: | |
| | | | Support: | |
| | | | Divorce settlement | : |
| | | | Property settlemen | t · |

| | tor 1 tor 2 | Walter Dean Marth Carol Joan Marth Case number (if known) | |
|-----|----------------|---|---|
| 30. | | amounts someone owes you les: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else | |
| | ✓ No ☐ Yes | s. Give specific information | |
| 31. | | ets in insurance policies les: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's inc | surance |
| | cor | s. Name the insurance mpany of each policy d list its value | Surrender or refund value: |
| 32. | If you a | terest in property that is due you from someone who has died are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently to receive property because someone has died | |
| | ✓ No | s. Give specific information | |
| 33. | | against third parties, whether or not you have filed a lawsuit or made a demand for payment les: Accidents, employment disputes, insurance claims, or rights to sue | |
| | ✓ No | s. Describe each claim | |
| 34. | | contingent and unliquidated claims of every nature, including counterclaims of the debtor and to set off claims | |
| | ✓ No | s. Describe each claim | |
| 35. | Any fin | nancial assets you did not already list | |
| | ✓ No ☐ Yes | s. Give specific information | |
| 36. | | e dollar value of all of your entries from Part 4, including any entries for pages you have ed for Part 4. Write that number here | \$2,468.11 |
| P | art 5: | Describe Any Business-Related Property You Own or Have an Interest In. List a | ny real estate in Part 1. |
| 37. | Do you | own or have any legal or equitable interest in any business-related property? | |
| | | . Go to Part 6. s. Go to line 38. | |
| | | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 38. | Accour | nts receivable or commissions you already earned | ordina or oxomptione. |
| | ✓ No ☐ Yes | s. Describe | |
| 39. | | equipment, furnishings, and supplies les: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices | |
| | ✓ No ☐ Yes | s. Describe | |

| | tor 1 tor 2 | Walter Dean Marth Carol Joan Marth Case number (if known) | |
|-----|----------------|---|---|
| 40 | Machir | ery, fixtures, equipment, supplies you use in business, and tools of your trade | |
| | ☑ No | s. Describe | |
| 41. | Invento | ry | |
| | ☑ No | s. Describe | |
| 42. | Interes | ts in partnerships or joint ventures | |
| | ✓ No ☐ Yes | s. Describe Name of entity: % of ownership: | |
| 43. | Custon | ner lists, mailing lists, or other compilations | |
| | ✓ No ☐ Yes | Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))? No Yes. Describe | |
| 44. | Any bu | siness-related property you did not already list | |
| | ✓ No | s. Give specific information. | |
| 45. | | e dollar value of all of your entries from Part 5, including any entries for pages you have d for Part 5. Write that number here | \$0.00 |
| 46. | | Describe Any Farm- and Commercial Fishing-Related Property You Own or Have a If you own or have an interest in farmland, list it in Part 1. own or have any legal or equitable interest in any farm- or commercial fishing-related property? | n interest in. |
| | | Go to Part 7. s. Go to line 47. | |
| | | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 47. | Farm a | nimals es: Livestock, poultry, farm-raised fish | |
| | ✓ No ☐ Yes | i | |
| 48. | Crops- | either growing or harvested | |
| | _ | s. Give specific | |
| 49. | Farm a | nd fishing equipment, implements, machinery, fixtures, and tools of trade | |
| | ✓ No ☐ Yes | 5 | |
| 50. | Farm a | | |
| | | nd fishing supplies, chemicals, and feed | |

| Deb Deb | tor 1 Walter Dean Marth tor 2 Carol Joan Marth | Case nu | Case number (if known) | | | | | | | |
|------------|--|-----------------------|------------------------------|---------------|--|--|--|--|--|--|
| 51. | 1. Any farm- and commercial fishing-related property you did not already list | | | | | | | | | |
| | ✓ No ☐ Yes. Give specific information | | | | | | | | | |
| 52. | Add the dollar value of all of your entries from Part 6, includin attached for Part 6. Write that number here | \$0.00 | | | | | | | | |
| Pa | art 7: Describe All Property You Own or Have an I | nterest in That You [| Did Not List Above | 9 | | | | | | |
| 53. | Do you have other property of any kind you did not already list Examples: Season tickets, country club membership | st? | | | | | | | | |
| | ✓ No ☐ Yes. Give specific information. | | | | | | | | | |
| 54. | Add the dollar value of all of your entries from Part 7. Write the | hat number here | → | \$0.00 | | | | | | |
| Pa | art 8: List the Totals of Each Part of this Form | | | | | | | | | |
| 55. | Part 1: Total real estate, line 2 | | → | \$0.00 | | | | | | |
| 56. | Part 2: Total vehicles, line 5 | \$10,000.00 | | | | | | | | |
| 57. | Part 3: Total personal and household items, line 15 | \$2,860.00 | | | | | | | | |
| 58. | Part 4: Total financial assets, line 36 | \$2,468.11 | | | | | | | | |
| 59. | Part 5: Total business-related property, line 45 | \$0.00 | | | | | | | | |
| 60. | Part 6: Total farm- and fishing-related property, line 52 | \$0.00 | | | | | | | | |
| 61. | Part 7: Total other property not listed, line 54 | +\$0.00 | | | | | | | | |
| 62. | Total personal property. Add lines 56 through 61 | \$15,328.11 | Copy personal property total | + \$15,328.11 | | | | | | |
| 63. | Total of all property on Schedule A/B. Add line 55 + line 62 | | | \$15.328.11 | | | | | | |

Debtor 1 **Walter Dean Marth**

Debtor 2 **Carol Joan Marth** Case number (if known)

| Dec | Carol Joan Marth | Case number (if known) | |
|-----|---|------------------------|----------|
| • | Have shall used and funciable no (datalla). | | |
| 6. | Household goods and furnishings (details): | | |
| | 2 Loveseat(s) | | \$300.00 |
| | COFFEE TABLE | | \$20.00 |
| | END TABLES | | \$40.00 |
| | DISHES / FLATWARE | | \$50.00 |
| | CHINA / SILVERWARE | | \$50.00 |
| | POTS / PANS / COOKWARE | | \$50.00 |
| | 1 BED | | \$200.00 |
| | LAMPS / ACCESSORIES | | \$100.00 |
| 7. | Electronics (details): | | |
| | TV | | \$300.00 |
| | 1 DVD PLAYER | | \$50.00 |
| | PERSONAL COMPUTER | | \$300.00 |
| | STEREO | | \$200.00 |
| | CELLULAR TELEPHONES | | \$100.00 |
| 12. | Jewelry (details): | | |
| | His and hers | | \$500.00 |
| | Costume Jewelry | | \$100.00 |
| | Timex | | \$50.00 |
| | Misc | \$50.00 | |

| Debtor 1 | Walter | Dean | Marth | | | | |
|--|--|---|--|--|---|---|------|
| Debtor 2 | First Name Carol | Middle Name Joan | e Last Name Marth | | | | |
| (Spouse, if filing) | | Middle Name | | | | | |
| | nkruptcy Court to | or the: WESTER | N DISTRICT OF T | EXAS | | Check if this is an amended filing | |
| Case number (if known) | | | | | | | |
| Official Form | 106C | | | | | | |
| Schedule C | The Prope | erty You Cl | aim as Exem | pt | | (| 04/1 |
| sing the property pace is needed, fi rite your name an | you listed on Scall out and attach d case number (i | hedule A/B: Prop to this page as m if known). | perty (Official Form 10 nany copies of Part | 06A/B) a 2: Addit | is your source, list th tional Page as nece | esponsible for supplying correct information e property that you claim as exempt. If essary. On the top of any additional pages. | more |
| to state a speci kempted up to the ceive certain be kemption of 100° | fic dollar amoun e amount of any nefits, and tax-e % of fair market | nt as exempt. Al y applicable stat exempt retireme value under a la | ternatively, you may tutory limit. Some e nt fundsmay be ur aw that limits the ex | y claim texemption | the full fair market ons-such as those in dollar amount. In to a particular doll | you claim. One way of doing so value of the property being for health aids, rights to However, if you claim an lar amount and the value of the le statutory amount. | |
| Part 1: Ide | ntify the Pro | perty You Cla | aim as Exempt | | | | |
| | | | | | | | |
| Which set of | exemptions are | you claiming? | Check one only, | even if | your spouse is filing | with you. | |
| You are | claiming state an | d federal nonban | kruptcy exemptions. | | , , | with you. | |
| You are | claiming state an | d federal nonban exemptions. 11 l | ukruptcy exemptions. J.S.C. § 522(b)(2) | 11 U.S. | .C. § 522(b)(3) | · | |
| You are of | claiming state an claiming federal e erty you list on | d federal nonban exemptions. 11 the schedule A/B the | ukruptcy exemptions. J.S.C. § 522(b)(2) nat you claim as exe | 11 U.S. | .C. § 522(b)(3) | below. | |
| You are of | claiming state an claiming federal e erty you list on of the property a | d federal nonban exemptions. 11 U Schedule A/B th and line on | ukruptcy exemptions. J.S.C. § 522(b)(2) | 11 U.S. | .C. § 522(b)(3) | · | n |
| You are of | claiming state an claiming federal e erty you list on of the property a | d federal nonban exemptions. 11 U Schedule A/B th and line on | J.S.C. § 522(b)(2) nat you claim as exe Current value of the portion you | 11 U.S. empt, fill Amou exem | C. § 522(b)(3) I in the information unt of the ption you claim | below. | 1 |
| You are a You ar | claiming state an claiming federal e erty you list on of the property at lists this prope | d federal nonban exemptions. 11 t Schedule A/B th and line on orty | lkruptcy exemptions. J.S.C. § 522(b)(2) nat you claim as exe Current value of the portion you own Copy the value fron | 11 U.S. empt, fill Amou exem | C. § 522(b)(3) I in the information unt of the ption you claim k only one box for | below. | 1 |
| You are a You ar | claiming state an claiming federal e erty you list on of the property at lists this prope | d federal nonban exemptions. 11 t Schedule A/B th and line on orty | Akruptcy exemptions. J.S.C. § 522(b)(2) That you claim as exe Current value of the portion you own Copy the value from Schedule A/B | 11 U.S. mpt, fill Amou exem Check each | I in the information unt of the ption you claim the only one box for exemption \$0.00 | below. Specific laws that allow exemption | 1 |
| You are a You ar | claiming state an claiming federal erty you list on of the property at lists this prope | d federal nonban exemptions. 11 t Schedule A/B th and line on orty | Akruptcy exemptions. J.S.C. § 522(b)(2) That you claim as exe Current value of the portion you own Copy the value from Schedule A/B | 11 U.S. Empt, fill Amou exem Check each | I in the information unt of the ption you claim the only one box for exemption \$0.00 100% of fair market value, up to any applicable statutory | below. Specific laws that allow exemption | 1 |
| You are of | claiming state an claiming federal erty you list on of the property at lists this prope | d federal nonban exemptions. 11 t Schedule A/B th and line on orty | Akruptcy exemptions. J.S.C. § 522(b)(2) That you claim as exe Current value of the portion you own Copy the value from Schedule A/B \$10,000.00 | ampt, fill Amou exem Check each | C. § 522(b)(3) I in the information unt of the ption you claim k only one box for exemption \$0.00 100% of fair market value, up to any applicable statutory imit | below. Specific laws that allow exemption 11 U.S.C. § 522(d)(2) | 1 |
| You are of | claiming state an claiming federal erty you list on of the property at lists this property and the property at lists this property at lis | d federal nonban exemptions. 11 t Schedule A/B th and line on orty | Akruptcy exemptions. J.S.C. § 522(b)(2) That you claim as exe Current value of the portion you own Copy the value from Schedule A/B | ampt, fill Amou exem Check each | In the information unt of the ption you claim k only one box for exemption \$0.00 100% of fair market value, up to any applicable statutory imit \$300.00 100% of fair market value, up to any applicable statutory imit | below. Specific laws that allow exemption | 1 |
| You are of | claiming state an claiming federal erty you list on of the property at lists this property and the property at lists this property at lis | d federal nonban exemptions. 11 the Schedule A/B the and line on erty | Akruptcy exemptions. J.S.C. § 522(b)(2) That you claim as exe Current value of the portion you own Copy the value from Schedule A/B \$10,000.00 | an Check each | I in the information unt of the ption you claim k only one box for exemption \$0.00 100% of fair market value, up to any applicable statutory imit \$300.00 100% of fair market | below. Specific laws that allow exemption 11 U.S.C. § 522(d)(2) | 1 |
| You are | claiming state an claiming federal erty you list on of the property at lists this property and the property at lists this property at lis | d federal nonban exemptions. 11 the Schedule A/B the and line on erty | Akruptcy exemptions. J.S.C. § 522(b)(2) That you claim as exe Current value of the portion you own Copy the value from Schedule A/B \$10,000.00 | an Check each | I in the information unt of the ption you claim k only one box for exemption \$0.00 100% of fair market value, up to any applicable statutory imit \$300.00 100% of fair market value, up to any applicable statutory imit | below. Specific laws that allow exemption 11 U.S.C. § 522(d)(2) | 1 |
| For any proprief description: chedule A/B that field description: 016 Hyundai School miles) field description: Loveseat(s) | claiming state an claiming federal erty you list on of the property at lists this property and the property at lists this property at lis | d federal nonban exemptions. 11 the Schedule A/B the and line on erty | Akruptcy exemptions. J.S.C. § 522(b)(2) That you claim as exe Current value of the portion you own Copy the value from Schedule A/B \$10,000.00 | an Check each | I in the information unt of the ption you claim k only one box for exemption \$0.00 100% of fair market value, up to any applicable statutory imit \$300.00 100% of fair market value, up to any applicable statutory imit | below. Specific laws that allow exemption 11 U.S.C. § 522(d)(2) | 1 |
| For any proportief description: chedule A/B that side description: 016 Hyundai Science from Schedule ide description: Loveseat(s) the from Schedule ide from | claiming state an claiming federal erty you list on of the property at lists this property at lists this property at 2 A/B: | d federal nonbanexemptions. 11 l Schedule A/B thand line on arty | Akruptcy exemptions. J.S.C. § 522(b)(2) That you claim as exe Current value of the portion you own Copy the value from Schedule A/B \$10,000.00 | ampt, fill Amou exem Check each | I in the information unt of the ption you claim k only one box for exemption \$0.00 100% of fair market value, up to any applicable statutory imit \$300.00 100% of fair market value, up to any applicable statutory imit | below. Specific laws that allow exemption 11 U.S.C. § 522(d)(2) | 1 |

□ No Yes

Case number (if known)

| Part 2: Additional Page | | | | |
|---|--|---|--------------------------------------|------------------------------------|
| Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | on you exemption you claim value from Check only one box for | | Specific laws that allow exemption |
| | Copy the value from Schedule A/B | | | |
| Brief description: | \$20.00 | $\overline{\mathbf{V}}$ | \$20.00 | 11 U.S.C. § 522(d)(3) |
| COFFEE TABLE | | | 100% of fair market value, up to any | |
| Line from Schedule A/B:6 | | | applicable statutory limit | |
| Brief description: | \$40.00 | $\overline{\mathbf{Q}}$ | \$40.00 | 11 U.S.C. § 522(d)(3) |
| END TABLES | | | 100% of fair market value, up to any | |
| Line from <i>Schedule A/B</i> : 6 | | | applicable statutory limit | |
| Brief description: | \$50.00 | | \$50.00 | 11 U.S.C. § 522(d)(3) |
| DISHES / FLATWARE | | | 100% of fair market value, up to any | |
| Line from Schedule A/B:6 | | | applicable statutory limit | |
| Brief description: CHINA / SILVERWARE | \$50.00 | | \$50.00 | 11 U.S.C. § 522(d)(3) |
| Line from Schedule A/B: 6 | | | 100% of fair market value, up to any | |
| Life from Schedule A/B | | | applicable statutory limit | |
| Brief description: | \$50.00 | | \$50.00 | 11 U.S.C. § 522(d)(3) |
| POTS / PANS / COOKWARE Line from Schedule A/B:6 | | | 100% of fair market value, up to any | |
| Line Holli Schedule A/D | | | applicable statutory limit | |
| Brief description: | \$200.00 | | \$200.00 | 11 U.S.C. § 522(d)(3) |
| Line from Schedule A/B: 6 | | | 100% of fair market value, up to any | |
| Line Holli Schedule A/D. | | | applicable statutory limit | |
| Brief description: LAMPS / ACCESSORIES | \$100.00 | Ø | \$100.00 | 11 U.S.C. § 522(d)(3) |
| Line from Schedule A/B: 6 | | | 100% of fair market value, up to any | |
| Ellie Holli Ochedale AVB | | | applicable statutory limit | |
| Brief description: | \$300.00 | $\overline{\mathbf{Q}}$ | \$300.00 | 11 U.S.C. § 522(d)(3) |
| TV Line from Schedule A/B: 7 | | | 100% of fair market value, up to any | |
| Liffe from Schedule A/D. | | | applicable statutory limit | |
| Brief description: | \$50.00 | Ø | \$50.00 | 11 U.S.C. § 522(d)(3) |
| 1 DVD PLAYER | | | 100% of fair market value, up to any | |
| Line from <i>Schedule A/B</i> : 7 | | | applicable statutory limit | |

Case number (if known)

| Part 2: Additional Page | | | | | |
|--|--|---|---|------------------------------------|--|
| Brief description of the property and line on <i>Schedule A/B</i> that lists this property | Current value of the portion you own | | | Specific laws that allow exemption | |
| | Copy the value from Schedule A/B | | | | |
| Brief description: PERSONAL COMPUTER | \$300.00 | \square | \$300.00 100% of fair market | 11 U.S.C. § 522(d)(3) | |
| Line from Schedule A/B: 7 | | _ | value, up to any applicable statutory limit | | |
| Brief description: STEREO | \$200.00 | <u> </u> | \$200.00 100% of fair market | 11 U.S.C. § 522(d)(3) | |
| Line from Schedule A/B: 7 | | | value, up to any applicable statutory limit | | |
| Brief description: CELLULAR TELEPHONES | \$100.00 | <u> </u> | \$100.00 100% of fair market | 11 U.S.C. § 522(d)(3) | |
| Line from Schedule A/B: 7 | | | value, up to any applicable statutory limit | | |
| Brief description: Clothing / Wearing Apparel for 2 adult(s) | \$400.00 | \square | \$400.00 100% of fair market | 11 U.S.C. § 522(d)(3) | |
| Line from Schedule A/B:11 | | value, up to any applicable statutory limit | | | |
| Brief description: His and hers | \$500.00 | ☑ | \$500.00 100% of fair market | 11 U.S.C. § 522(d)(4) | |
| Line from Schedule A/B:12 | | value, up to any applicable statutory limit | | | |
| Brief description: Costume Jewelry | \$100.00 | Ø | \$100.00 100% of fair market | 11 U.S.C. § 522(d)(4) | |
| Line from Schedule A/B:12 | | | value, up to any applicable statutory limit | | |
| Brief description: Timex | \$50.00 | 1 | \$50.00 100% of fair market | 11 U.S.C. § 522(d)(4) | |
| Line from Schedule A/B:12 | | | value, up to any applicable statutory limit | | |
| Brief description: Misc | \$50.00 | V | \$50.00 100% of fair market | 11 U.S.C. § 522(d)(4) | |
| Line from Schedule A/B:12 | | | value, up to any applicable statutory limit | | |
| Brief description: Cash on Hand | \$350.00 | V | \$350.00 100% of fair market | 11 U.S.C. § 522(d)(5) | |
| Line from Schedule A/B:16 | | | value, up to any applicable statutory limit | | |

Case number (if known)

| Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | Amount of the exemption you claim | Specific laws that allow exemption | |
|---|--|--|------------------------------------|--|
| | Copy the value from Schedule A/B | Check only one box for each exemption | | |
| Brief description: Wells Fargo (Checking 1078848353) Line from Schedule A/B:17.1 | \$1,047.43 | \$1,047.43 100% of fair market value, up to any applicable statutory limit | 11 U.S.C. § 522(d)(5) | |
| Brief description: RBFCU (Checking 192140799) Line from Schedule A/B: | \$770.68 | \$770.68 100% of fair market value, up to any applicable statutory limit | 11 U.S.C. § 522(d)(5) | |
| Brief description: Retirement account TRA Debtor 2 receives \$3231.95 monthly Line from Schedule A/B:21 | \$0.00 | \$0.00 100% of fair market value, up to any applicable statutory limit | 11 U.S.C. § 522(d)(12) | |
| Brief description: Retirement account for Debtor 1 Concordia Plan Services. Debtor 1 receives \$2288.82 monthly Line from Schedule A/B: | \$0.00 | \$0.00 100% of fair market value, up to any applicable statutory limit | 11 U.S.C. § 522(d)(12) | |
| Brief description: Landlord Deposit Line from Schedule A/B: | \$300.00 | \$300.00 100% of fair market value, up to any applicable statutory limit | 11 U.S.C. § 522(d)(5) | |

Scheme Selected: Federal

UNITED STATES BANKRUPTCY COURT WESTERN DISTRICT OF TEXAS AUSTIN DIVISION

IN RE: Walter Dean Marth Carol Joan Marth

CASE NO

CHAPTER 7

SCHEDULE C-1 (SUPPLEMENTAL EXEMPTION ANALYSIS)

Exemption Totals by Category:

(Values and liens of surrendered property are NOT included in this section)

| No. | Category | Gross Property Value | Total Encumbrances | Total Equity | Total Amount Exempt | Total Amount Non-Exempt |
|-----|---|-------------------------|-----------------------|-----------------|------------------------|----------------------------|
| 1. | Real property | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 3. | Motor vehicles (cars, etc.) | \$10,000.00 | \$34,000.00 | \$0.00 | \$0.00 | \$0.00 |
| 4. | Water/Aircraft, Motor Homes, Rec. veh. and access. | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 6. | Household goods and furnishings | \$810.00 | \$0.00 | \$810.00 | \$810.00 | \$0.00 |
| 7. | Electronics | \$950.00 | \$0.00 | \$950.00 | \$950.00 | \$0.00 |
| 8. | Collectibles of value | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 9. | Equipment for sports and hobbies | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 10. | Firearms | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 11. | Clothes | \$400.00 | \$0.00 | \$400.00 | \$400.00 | \$0.00 |
| 12. | Jewelry | \$700.00 | \$0.00 | \$700.00 | \$700.00 | \$0.00 |
| 13. | Non-farm animals | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 14. | Unlisted pers. and household itemsincl. health aids | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 16. | Cash | \$350.00 | \$0.00 | \$350.00 | \$350.00 | \$0.00 |
| 17. | Deposits of money | \$1,818.11 | \$0.00 | \$1,818.11 | \$1,818.11 | \$0.00 |
| 18. | Bonds, mutual funds or publicly traded stocks | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 19. | Non-pub. traded stock and int. in businesses | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 20. | Govt. and corp. bonds and other instruments | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 21. | Retirement or pension accounts | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 22. | Security deposits and prepayments | \$300.00 | \$0.00 | \$300.00 | \$300.00 | \$0.00 |
| 23. | Annuities | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 24. | Interests in an education IRA | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 25. | Trusts, equit. or future int. (not in line 1) | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 26. | Patents, copyrights, and other intellectual prop. | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 27. | Licenses, franchises, other general intangibles | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 28. | Tax refunds owed to you | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |

UNITED STATES BANKRUPTCY COURT WESTERN DISTRICT OF TEXAS AUSTIN DIVISION

IN RE: Walter Dean Marth
Carol Joan Marth

CASE NO

CHAPTER 7

SCHEDULE C-1 (SUPPLEMENTAL EXEMPTION ANALYSIS)

Continuation Sheet # 1

Exemption Totals by Category:

TOTALS:

Scheme Selected: Federal (Values and liens of surrendered property are NOT included in this section) Gross Total Total Amount Total **Total Amount Property Value Encumbrances Equity** Exempt Non-Exempt No. Category 29. Family support \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 30. \$0.00 \$0.00 \$0.00 \$0.00 Other amounts someone owes you \$0.00 31. Interests in insurance policies \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 32. Any int. in prop. due you from \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 someone who has died 33. Claims vs. third parties, even \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 if no demand 34. Other contin. and unliq. claims \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 of every nature 35. Any financial assets you did \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 not already list Accounts rec. or commissions you \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 38. already earned 39. Office equipment, furnishings, \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 and supplies 40. Mach., fixt., equip., bus. suppl., \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 tools of trade 41. \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 Inventory 42. Interests in partnerships or \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 joint ventures 43. Customer and mailing lists, or \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 other compilations 44. Any business-related property not \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 already listed 47. Farm animals \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 48. Crops--either growing or harvested \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 49. \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 Farm/fishing equip., impl., mach., fixt., tools \$0.00 \$0.00 50. Farm and fishing supplies, chemicals, \$0.00 \$0.00 \$0.00 and feed 51. Farm/commercial fishing-related prop. \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 not listed 53. Any other property of any kind not \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 already listed

\$15,328.11

\$34,000.00

\$5,328.11

\$5,328.11

\$0.00

UNITED STATES BANKRUPTCY COURT WESTERN DISTRICT OF TEXAS AUSTIN DIVISION

IN RE: Walter Dean Marth Carol Joan Marth

CASE NO

CHAPTER 7

SCHEDULE C-1 (SUPPLEMENTAL EXEMPTION ANALYSIS)

Continuation Sheet #2

Surrendered Property:

The following property is to be surrendered by the debtor. Although this property is NOT exempt, it is NOT considered "non-exempt" for purposes of this analysis. The below listed items are to be returned to the lienholder.

Property Description Market Value Lien **Equity Real Property** (None) **Personal Property** (None) \$0.00 \$0.00 \$0.00 TOTALS: Non-Exempt Property by Item: The following property, or a portion thereof, is non-exempt. **Market Value** Non-Exempt Amount **Property Description** Lien **Equity Real Property** (None) **Personal Property** (None)

TOTALS: \$0.00 \$0.00 \$0.00

| Summary | |
|--|-------------|
| A. Gross Property Value (not including surrendered property) | \$15,328.11 |
| B. Gross Property Value of Surrendered Property | \$0.00 |
| C. Total Gross Property Value (A+B) | \$15,328.11 |
| D. Gross Amount of Encumbrances (not including surrendered property) | \$34,000.00 |
| E. Gross Amount of Encumbrances on Surrendered Property | \$0.00 |
| F. Total Gross Encumbrances (D+E) | \$34,000.00 |
| G. Total Equity (not including surrendered property) / (A-D) | \$5,328.11 |
| H. Total Equity in surrendered items (B-E) | \$0.00 |
| I. Total Equity (C-F) | \$5,328.11 |
| J. Total Exemptions Claimed (Wild Card Used: \$2,468.11, Available: \$23,731.89) | \$5,328.11 |
| K. Total Non-Exempt Property Remaining (G-J) | \$0.00 |

| Fill in this inf | ormation to iden | tify your case | : | | | | |
|--|---------------------------------|-----------------------------|------------------------|---------------------------------------|--------------------------|-------------------|--|
| Debtor 1 | Walter | Dean | Marth | | | | |
| | First Name | Middle Name | Last Name | | | | |
| Debtor 2 | Carol | Joan Middle Name | Marth | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | | | |
| United States Ba | nkruptcy Court for the | E WESTERN DIS | STRICT OF TEXAS | | | | |
| Case number | | | | | ☐ Check if this is | s an | |
| (if known) | | | | | amended filing | | |
| Official Form | 106D | | | | | | |
| Schedule D | : Creditors WI | ho Have Cla | ims Secured by | Property | | 12/15 | |
| Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known). 1. Do any creditors have claims secured by your property? No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Yes. Fill in all of the information below. Part 1: List All Secured Claims 2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As Amount of claim Yalue of collateral Unsecured | | | | | | | |
| much as poss creditor's nam | ible, list the claims in ne. | · | • | Do not deduct the value of collateral | that supports this claim | portion If any | |
| 2.1 | | Describe the secures the | e property that claim: | \$34,000.00 | \$10,000.00 | \$24,000.00 | |
| Kia Motors Fina Creditor's name PO Box 20835 Number Street | nce | —— 2016 Hyun | dai Sonata PHEV | | | | |
| As of the date you file, the claim is: Check all that apply. Contingent | | | | | | | |
| Date debt was inc | eurred <u>12/16/2015</u> | Edot 4 digits | of account number | 5 3 3 7 | | | |
| Add the dollar val | ue of your entries in | Column A on thi | s page. Write | \$34,000.00 | _ | | |
| If this is the last p | age of your form, ac | ld the dollar value | e totals from | | | | |

Official Form 106D

all pages. Write that number here:

\$34,000.00

| Fill in this info | ormation to i | dentify your c | ase: | | | |
|--|---|---|--|--|---|-----------------------------|
| Debtor 1 | Walter | Dean | Marth | | | |
| | First Name | Middle Name | Last Name | | | |
| Debtor 2 | Carol | Joan | Marth | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | | |
| United States Bar | nkruptcy Court fo | or the: WESTERN | I DISTRICT OF TEXAS | | | |
| Case number (if known) | | | | | Check if this is a amended filing | an |
| Official Form | 106E/F | | | | | |
| Schedule E/ | F: Credito | rs Who Have | e Unsecured Claims | | | 12/15 |
| Do not include any If more space is not to this page. On the | y creditors with eeded, copy the he top of any ac | partially secured Part you need, fi dditional pages, w | and on Schedule G: Executory Co claims that are listed in Schedule Ill it out, number the entries in the rite your name and case number secured Claims | D: Creditors Who He boxes on the left. At | old Claims Secur | ed by Property. |
| 1. Do any credit | ors have priorit | y unsecured clair | ns against you? | | | |
| ☐ No. Go to | o Part 2. | | | | | |
| claim. For eac show both prio more space is claim, list the c | ch claim listed, ic prity and nonprior needed for prior other creditors in | dentify what type of rity amounts. As m rity unsecured clain n Part 3. | creditor has more than one priority of claim it is. If a claim has both prior nuch as possible, list the claims in a ms, fill out the Continuation Page of the instructions for this form in the instructions for this form in the instructions. | rity and nonpriority amo Iphabetical order acco Part 1. If more than o | ounts, list that clair rding to the credito | n here and or's name. If |
| (i or an explain | iditori or edori typ | oc or olaim, occ in | | Total claim | Priority amount | Nonpriority amount |
| 2.1 | | | | \$3,500.00 | \$3,500.00 | \$0.00 |
| Internal Revenue | | | Last 4 digits of account number | · · | | |
| Priority Creditor's Name Centralized Inso | | tions | • | | | |
| Number Street | reney epera | | When was the debt incurred? | 2018 | - | |
| PO Box 7346 | | | As of the date you file, the claim | is: Check all that app | ly. | |
| | | | Contingent Unliquidated | | | |
| Philadelphia City | PA State | 19101-7346 ZIP Code | Disputed | | | |
| Who incurred the | | | Type of PRIORITY unsecured cla | aim: | | |
| Debtor 1 only | | | Domestic support obligations | | | |
| ☐ Debtor 2 only ☐ Debtor 1 and D | ebtor 2 only | | Taxes and certain other debts Claims for death or personal in | | ent | |
| | the debtors and | another | intoxicated | ijary writte you were | | |
| | laim is for a co | mmunity debt | Other. Specify | | | |
| Is the claim subject No No | ct to offset? | | | | | |
| Yes | | | | | | |

| Debtor 1 Walter Dean Marth Debtor 2 Carol Joan Marth | Case number (if known) | | | | | |
|---|--|--|--|--|--|--|
| Part 2: List All of Your NONPRIORITY Unsecured Claims | | | | | | |
| B. Do any creditors have nonpriority unsecured claims against you? ☐ No. You have nothing to report in this part. Submit this form to the court with your other schedules. ☐ Yes | | | | | | |
| If a creditor has more than one nonpriority unse type of claim it is. Do not list claims already inc | 4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If more space is needed for nonpriority unsecured claims, fill out the Continuation Page of Part 2. | | | | | |
| | Total claim | | | | | |
| 4.1 | \$16,137.00 | | | | | |
| American Express Nonpriority Creditor's Name PO Box 981537 Number Street | Last 4 digits of account number 9 4 3 2 When was the debt incurred? various As of the date you file, the claim is: Check all that apply. Contingent Unliquidated | | | | | |
| El Paso TX 79998-1537 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes | Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card | | | | | |
| American Express Nonpriority Creditor's Name PO Box 981537 Number Street | Last 4 digits of account number 7 0 1 8 When was the debt incurred? various As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Signature 1 | | | | | |
| El Paso City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes | Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card | | | | | |

Debtor 1 Walter Dean Marth Debtor 2 **Carol Joan Marth** Case number (if known) Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page After listing any entries on this page, number them sequentially from the **Total claim** previous page. 4.3 \$18.795.00 Amex Dept Store (Macy's) Last 4 digits of account number 0 0 8 7 Nonpriority Creditor's Name When was the debt incurred? various PO Box 8218 Number As of the date you file, the claim is: Check all that apply. ☐ Contingent Unliquidated Disputed OH 45040 Mason ZIP Code City State Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. ☐ Student loans Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only \square that you did not report as priority claims Debtor 1 and Debtor 2 only Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify ☐ Check if this claim is for a community debt **Credit Card** Is the claim subject to offset? **☑** No Yes П \$861.00 Last 4 digits of account number Autin-Travis County EMS 5 6 2 7 Nonpriority Creditor's Name When was the debt incurred? 4/28/2018-4/28/2018 15 Waller St, 2nd Floor Street As of the date you file, the claim is: Check all that apply. Number Contingent Unliquidated Disputed **Austin** TX 78702-5240 City State ZIP Code Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. ☐ Student loans Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only П that you did not report as priority claims Debtor 1 and Debtor 2 only Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify ☐ Check if this claim is for a community debt **Medical Services** Is the claim subject to offset? **☑** No ☐ Yes 4.5 \$13,726.00 **Bank of America** Last 4 digits of account number 7 0 3 1 Nonpriority Creditor's Name When was the debt incurred? various PO Box 982238 As of the date you file, the claim is: Check all that apply. Number Contingent Unliquidated Disputed El Paso TX 79998 City State 7IP Code Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. ☐ Student loans Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only that you did not report as priority claims Debtor 1 and Debtor 2 only Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify Check if this claim is for a community debt **Credit Card** Is the claim subject to offset? No Yes

Debtor 1 Walter Dean Marth Debtor 2 **Carol Joan Marth** Case number (if known) Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page After listing any entries on this page, number them sequentially from the **Total claim** previous page. 4.6 \$11,326.00 Capital One Bank USA Last 4 digits of account number 9 8 6 2 Nonpriority Creditor's Name When was the debt incurred? various PO Box 30281 Number As of the date you file, the claim is: Check all that apply. ☐ Contingent Unliquidated Disputed 84130-0281 Salt Lake City UT ZIP Code City State Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. ☐ Student loans Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only \square that you did not report as priority claims Debtor 1 and Debtor 2 only Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify ☐ Check if this claim is for a community debt **Credit Card** Is the claim subject to offset? **☑** No Yes П \$27,359.00 Last 4 digits of account number **Chase Card Services** 4 5 1 0 Nonpriority Creditor's Name When was the debt incurred? various Attn: Bankruptcy As of the date you file, the claim is: Check all that apply. Stree Number PO Box 15298 Contingent Unliquidated Disputed Wilmington DE 19850-5298 City State ZIP Code Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. ☐ Student loans Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only П that you did not report as priority claims Debtor 1 and Debtor 2 only Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify ☐ Check if this claim is for a community debt Credit Card Is the claim subject to offset? **☑** No ☐ Yes 4.8 \$5,750.00 Last 4 digits of account number Chase Card Services 1 1 3 6 Nonpriority Creditor's Name When was the debt incurred? various Attn: Bankruptcy Stree As of the date you file, the claim is: Check all that apply. Number PO Box 15298 Contingent Unliquidated Disputed 19850-5298 Wilmington DE State 7IP Code Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. ☐ Student loans Debtor 1 only Obligations arising out of a separation agreement or divorce \square Debtor 2 only that you did not report as priority claims Debtor 1 and Debtor 2 only Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify Check if this claim is for a community debt **Credit Card** Is the claim subject to offset? No Yes

Debtor 1 Walter Dean Marth Debtor 2 **Carol Joan Marth** Case number (if known) Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page After listing any entries on this page, number them sequentially from the **Total claim** previous page. 4.9 \$1,100.00 Last 4 digits of account number Citicards/CBNA <u>5 6 3 7 </u> Nonpriority Creditor's Name When was the debt incurred? various PO Box 6190 As of the date you file, the claim is: Check all that apply. Number ☐ Contingent Unliquidated Disputed Sioux Falls SD 57117-6190 State ZIP Code City Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. ☐ Student loans Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only that you did not report as priority claims Debtor 1 and Debtor 2 only Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify Check if this claim is for a community debt **Credit Card** Is the claim subject to offset? **☑** No Yes 4100-3904-8899-2690 4.10 \$16,084.00 Citicards/CBNA Last 4 digits of account number 6 9 6 3 Nonpriority Creditor's Name When was the debt incurred? various PO Box 6241 As of the date you file, the claim is: Check all that apply. Number ☐ Contingent Unliquidated Disputed Sioux Falls SD 57117-6241 State ZIP Code Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. ☐ Student loans Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only $\overline{\mathbf{A}}$ that you did not report as priority claims Debtor 1 and Debtor 2 only Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify ☐ Check if this claim is for a community debt **Credit Card** Is the claim subject to offset? **☑** No Yes

Debtor 1 Walter Dean Marth Debtor 2 **Carol Joan Marth** Case number (if known) Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page After listing any entries on this page, number them sequentially from the **Total claim** previous page. 4.11 \$0.00 Comenity /Christopher & Banks Last 4 digits of account number 3 3 1 4 Nonpriority Creditor's Name When was the debt incurred? various PO Box 182789 Number As of the date you file, the claim is: Check all that apply. ☐ Contingent Unliquidated Disputed Columbus OH 43218 ZIP Code City State Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. ☐ Student loans Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only \square that you did not report as priority claims Debtor 1 and Debtor 2 only Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify ☐ Check if this claim is for a community debt **Credit Card** Is the claim subject to offset? **☑** No Yes П 4.12 \$17,578.00 Last 4 digits of account number Comenity Capital Bank/Toyota Rewards 0 1 3 5 Nonpriority Creditor's Name When was the debt incurred? various PO Box 183043 As of the date you file, the claim is: Check all that apply. Number Street Contingent Unliquidated Disputed Columbus OH 43218-3043 City State ZIP Code Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. ☐ Student loans Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only П that you did not report as priority claims Debtor 1 and Debtor 2 only Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify ☐ Check if this claim is for a community debt **Credit Card** Is the claim subject to offset? **☑** No ☐ Yes 4.13 \$10,099.00 LVNV Funding, LLC Last 4 digits of account number 6 1 7 1 Nonpriority Creditor's Name 1/1/2016-12/31/2018 When was the debt incurred? PO Box 1269 As of the date you file, the claim is: Check all that apply. Number Contingent Unliquidated Disputed SC Greenville 29602 State 7IP Code Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. ☐ Student loans Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only that you did not report as priority claims Debtor 1 and Debtor 2 only Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify Check if this claim is for a community debt **Debt buyer** Is the claim subject to offset? No Yes

Debtor 1 Walter Dean Marth Debtor 2 **Carol Joan Marth** Case number (if known) Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page After listing any entries on this page, number them sequentially from the **Total claim** previous page. 4.14 \$9.800.00 Macy's Last 4 digits of account number 8 4 9 Nonpriority Creditor's Name When was the debt incurred? various Attn: Bankruptcy Processing Number Stree As of the date you file, the claim is: Check all that apply. PO Box 8218 ☐ Contingent Unliquidated Disputed OH 45040 Mason ZIP Code City State Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. ☐ Student loans Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only \square that you did not report as priority claims Debtor 1 and Debtor 2 only Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify ☐ Check if this claim is for a community debt **Credit Card** Is the claim subject to offset? **☑** No Yes П 4.15 \$10,100.00 Last 4 digits of account number **Nordstrom TD Bank** 2 6 8 2 Nonpriority Creditor's Name When was the debt incurred? various 13531 É. Caley Ave As of the date you file, the claim is: Check all that apply. Number Stree Contingent Unliquidated Disputed CO 80111 Englewood City State ZIP Code Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. ☐ Student loans ☐ Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only $\overline{\mathbf{Q}}$ that you did not report as priority claims Debtor 1 and Debtor 2 only Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify ☐ Check if this claim is for a community debt **Credit Card** Is the claim subject to offset? **☑** No ☐ Yes 4.16 \$1,533.00 Last 4 digits of account number **PayPal Credit** 1 1 4 0 Nonpriority Creditor's Name When was the debt incurred? various PO Box 5138 As of the date you file, the claim is: Check all that apply. Number Contingent Unliquidated Disputed **Timonium** MD 21904 City 7IP Code State Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. ☐ Student loans Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only that you did not report as priority claims Debtor 1 and Debtor 2 only Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify Check if this claim is for a community debt **Credit Card** Is the claim subject to offset? No Yes

Debtor 1 Walter Dean Marth Debtor 2 **Carol Joan Marth** Case number (if known) Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page After listing any entries on this page, number them sequentially from the **Total claim** previous page. 4.17 \$4.952.00 Last 4 digits of account number Sears/CBNA <u>6 1 8 4 </u> Nonpriority Creditor's Name When was the debt incurred? various P.O. Box 6282 As of the date you file, the claim is: Check all that apply. ☐ Contingent Unliquidated □ Disputed Sioux Falls SD 57117-6282 State ZIP Code City Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. ☐ Student loans Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only $\overline{\mathbf{A}}$ that you did not report as priority claims Debtor 1 and Debtor 2 only Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify ☐ Check if this claim is for a community debt **Credit Card** Is the claim subject to offset? **☑** No Yes П 4.18 \$5,840.00 Last 4 digits of account number Synchrony Bank/JC Penney 4 3 9 Nonpriority Creditor's Name When was the debt incurred? various Attn: Bankruptcy Dept. As of the date you file, the claim is: Check all that apply. Number Street PO Box 965007 ☐ Contingent Unliquidated Orlando, FL 32896-50007 Disputed City State ZIP Code Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. ☐ Student loans ☐ Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only $\overline{\mathbf{V}}$ that you did not report as priority claims Debtor 1 and Debtor 2 only Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify ☐ Check if this claim is for a community debt **Credit Card** Is the claim subject to offset? No Yes

Debtor 1 Walter Dean Marth Debtor 2 **Carol Joan Marth** Case number (if known) Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page After listing any entries on this page, number them sequentially from the **Total claim** previous page. 4.19 \$61,517.00 Last 4 digits of account number **USBank** <u>6 5 9 5</u> Nonpriority Creditor's Name When was the debt incurred? various PO Box 108 As of the date you file, the claim is: Check all that apply. Number ☐ Contingent Unliquidated □ Disputed St Louis MO 63166 City State ZIP Code Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. ☐ Student loans Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only that you did not report as priority claims Debtor 1 and Debtor 2 only \square Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify Check if this claim is for a community debt **Credit Card** Is the claim subject to offset? **☑** No Yes Also Account Number: 4190080802517247 Line of Credit Acct Number: 153557776116 4.20 \$1.094.00 Von Maur Last 4 digits of account number 9 8 1 1 Nonpriority Creditor's Name When was the debt incurred? various 6565 Brady Street As of the date you file, the claim is: Check all that apply. Number Contingent Unliquidated Disputed IΑ **Davenport** 52806 City State ZIP Code Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. ☐ Student loans □ Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only $\overline{\mathbf{Q}}$ that you did not report as priority claims Debtor 1 and Debtor 2 only Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify ☐ Check if this claim is for a community debt **Charge Account** Is the claim subject to offset? No Yes

Debtor 1 Walter Dean Marth
Debtor 2 Case number (if known)

Part 3: List Others to Be Notified About a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional parties to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

| Avant, Inc. | On which entry in Part 1 or Part 2 did you list the original creditor? | | | | | |
|----------------------------|--|-----------------------|--------------------------------------|--|----------|---|
| Name 222 N LaSalle St, Ste | Line 4.13 of | (Check one): | П | Part 1: Creditors with Priority Unsecured Claims | | |
| Number Street | | | | (| | Part 2: Creditors with Nonpriority Unsecured Claims |
| | | | — — Last 4 digits of | account num | ber | |
| Chicago City | IL State | 60601 ZIP Code | | | | |
| City | State | ZIF Code | | | | |
| Califf & Harper, P.C. | | | On which entry | in Part 1 or P | art 2 | did you list the original creditor? |
| Name Steven L. Nelson | | | Line 4.20 of | (Check one): | П | Part 1: Creditors with Priority Unsecured Claims |
| Number Street | | | | , | _ | Part 2: Creditors with Nonpriority Unsecured Claims |
| PO Box 719 | | | | | V | Tart 2. Oreators with Nonphorty Oriscedica Olainis |
| | | 04000 | Last 4 digits of | account num | ber | <u> </u> |
| Moline City | IL State | 61266 ZIP Code | <u> </u> | | | |
| 0.1, | Clair | 0000 | | | | |
| Frontline Asset | | | On which entry | in Part 1 or P | art 2 | did you list the original creditor? |
| Name 2700 Snelling Ave N S | TE 250 | | Line 4.13 of | (Check one): | П | Part 1: Creditors with Priority Unsecured Claims |
| Number Street | | | | | | Part 2: Creditors with Nonpriority Unsecured Claims |
| | | | _ | | ت | |
| Roseville | MN | 55113 | Last 4 digits of | account num | ber | <u>6</u> <u>1</u> <u>7</u> <u>1</u> |
| City | State | ZIP Code | _ | | | |
| | | | | | | |
| GC Services Limited F | Partnersh | nip | On which entry | in Part 1 or P | art 2 | ? did you list the original creditor? |
| Name 6330 Gulfton | | | Line 4.17 of | (Check one): | | Part 1: Creditors with Priority Unsecured Claims |
| Number Street | | | | | <u>~</u> | Part 2: Creditors with Nonpriority Unsecured Claims |
| | | | | | | |
| Houston | TX | 77081 | Last 4 digits of | account num | oer | |
| City | State | ZIP Code | _ | | | |
| | | | | | | |
| H&R Accounts Name | | | _ On which entry | in Part 1 or P | art 2 | 2 did you list the original creditor? |
| 5320 22nd Ave #672 | | | Line 4.20 _of | (Check one): | | Part 1: Creditors with Priority Unsecured Claims |
| Number Street | | | _ | | | Part 2: Creditors with Nonpriority Unsecured Claims |
| | | | Last 4 digits of | account num | ber | |
| Moline | IL State | 61266-0672 | _ | | | |

|--|

| Part 3: List O | thers to Be | Notified Abo | ut a Debt That You Already Listed Continuation Page | | |
|--|-------------|----------------------------|--|--|--|
| Midland Credit Management | | | On which entry in Part 1 or Part 2 did you list the original creditor? | | |
| Name 2365 Northside Dr., ste 300 | | | Line 4.18 of <i>(Check one):</i> \square Part 1: Creditors with Priority Unsecured Claims | | |
| Number Street | | | Part 2: Creditors with Nonpriority Unsecured Claims | | |
| | | | _ | | |
| San Diego | CA | 92108 | — Last 4 digits of account number | | |
| City | State | ZIP Code | _ | | |
| | | | | | |
| PayPal Credit/Comenity Capital Bank Name | | | On which entry in Part 1 or Part 2 did you list the original creditor? | | |
| Bankruptcy Depart | ment | | Line 4.16 of (Check one): Part 1: Creditors with Priority Unsecured Claims | | |
| Number Street PO Box 183043 | | | Part 2: Creditors with Nonpriority Unsecured Claims | | |
| | | | | | |
| Columbus | ОН | 43218-3043 | — Last 4 digits of account number | | |
| City | State | ZIP Code | _ | | |
| PayPal Smart Conr | nect/SVNCB | | On which entry in Part 1 or Part 2 did you list the original creditor? | | |
| Name | | | = · · · · · · · · · · · · · · · · · · · | | |
| Attn: Bankruptcy I | Dept. | | Line of (Check one): Part 1: Creditors with Priority Unsecured Claims | | |
| PO Box 965060 | | | Part 2: Creditors with Nonpriority Unsecured Claims — | | |
| | | | Last 4 digits of account number | | |
| Orlando | FL State | 32896-5060 ZIP Code | <u> </u> | | |
| City | State | ZIP Code | | | |
| United Collection Bureau | | | On which entry in Part 1 or Part 2 did you list the original creditor? | | |
| Name 5620 Southwyck Blvd Ste 206 | | | Line 4.10 of <i>(Check one):</i> \square Part 1: Creditors with Priority Unsecured Claims | | |
| Number Street | 0.0 200 | | Part 2: Creditors with Nonpriority Unsecured Claims | | |
| | | | | | |
| | | | — Last 4 digits of account number <u>8 3 0 6</u> | | |
| Toledo City | OH State | 43614 ZIP Code | _ | | |
| . , | | | | | |
| Zwicker & Associates | | | On which entry in Part 1 or Part 2 did you list the original creditor? | | |
| Name 1 Chisholm Trail Suite 301 | | | Line 4.1 of (Check one): Part 1: Creditors with Priority Unsecured Claims | | |
| Number Street | | | Part 2: Creditors with Nonpriority Unsecured Claims | | |
| | | | | | |
| Pound Pook | TV | 78681 | — Last 4 digits of account number | | |
| Round Rock City | TX State | 78681 ZIP Code | _ | | |

Case number (if known)

Part 4: Add the Amounts for Each Type of Unsecured Claim

Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only.
 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

| | | | Total claim | |
|-----------------------------|-----|---|--------------|--------------|
| Total claims from Part 1 | 6a. | Domestic support obligations | 6a. | \$0.00 |
| Hom Part I | 6b. | Taxes and certain other debts you owe the government | 6b. | \$3,500.00 |
| | 6c. | Claims for death or personal injury while you were intoxicated | 6c. | \$0.00 |
| | 6d. | Other. Add all other priority unsecured claims. Write that amount here. | 6d. - | \$0.00 |
| | 6e. | Total. Add lines 6a through 6d. | 6d. | \$3,500.00 |
| | | | | Total claim |
| Total claims from Part 2 | 6f. | Student loans | 6f. | \$0.00 |
| | 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$0.00 |
| | 6h. | Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$0.00 |
| | 6i. | Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. - | \$250,469.00 |
| | 6j. | Total. Add lines 6f through 6i. | 6j. | \$250,469.00 |

| Debtor 1 | Walter | Dean | Marth | | | |
|--|---|--|---|--|--|----------------------------|
| Dobtor . | First Name | Middle Name | Last Name | | | |
| Debtor 2 | Carol First Name | Joan Middle Name | Marth Last Name | | | |
| , | 0 / | | | | | |
| United Sta | tes Bankruptcy Court fo | or the: WESTERN DIS | STRICT OF TEXAS | | | |
| Case num (if known) | ber | | | | Check if this is an amended filing | |
| Official F | Form 106G | | | | | |
| | | | | | | |
| e as comp orrect info | lete and accurate as promation. If more space | | ed people are filing to additional page, fill i | gether, both are equally t out, number the entrie | y responsible for supplyir s, and attach it to this pag | ng |
| se as comporrect info | lete and accurate as programmers and accurate as programmers and additional page | possible. If two marrie e is needed, copy the s, write your name an | ed people are filing to additional page, fill i d case number (if kno | gether, both are equally t out, number the entrie | | ng |
| Be as comporrect info | olete and accurate as primation. If more space of any additional page have any executory of the control of the | possible. If two marrie e is needed, copy the s, write your name an contracts or unexpired tile this form with the co | ed people are filing to additional page, fill in d case number (if known I leases? urt with your other scho | egether, both are equally tout, number the entried own). | | ng ge. |
| Be as comporect info on the top of the top o | olete and accurate as permation. If more space of any additional page I have any executory of the control of the information parately each person | possible. If two marries is needed, copy the s, write your name an contracts or unexpired lile this form with the comation below even if the cor company with who cle lease, cell phone). | ed people are filing to additional page, fill in d case number (if known I leases? urt with your other school e contracts or leases are | egether, both are equally tout, number the entried own). edules. You have nothing are listed on Schedule A/a | s, and attach it to this pag | n. 06A/B). ase |
| e as comporect information the top of the to | plete and accurate as primation. If more space of any additional page is have any executory of the control of the information parately each person for example, rent, vehicles of the contracts and unexpersed. | possible. If two marries is needed, copy the s, write your name an contracts or unexpired lile this form with the comation below even if the cor company with who cle lease, cell phone). | ed people are filing to additional page, fill in d case number (if known I leases? urt with your other school e contracts or leases at m you have the contract. | egether, both are equally tout, number the entried own). edules. You have nothing are listed on Schedule A/a | g else to report on this form B: Property (Official Form 1 e what each contract or le | ng ge. n. 06A/B). |
| te as comporrect information the top of the | plete and accurate as permation. If more space of any additional page is have any executory of the control of the information and parately each person for example, rent, vehically contracts and unexperson or company with the steiner Ranch | possible. If two marries is needed, copy the s, write your name an contracts or unexpired lile this form with the comation below even if the or company with who cle lease, cell phone). | ed people are filing to additional page, fill in d case number (if known I leases? urt with your other school e contracts or leases at m you have the contract. | egether, both are equally tout, number the entried own). edules. You have nothing are listed on Schedule A/a act or lease. Then state for this form in the instruction. | g else to report on this form B: Property (Official Form 1 e what each contract or le | ng ge. n. 06A/B). |
| Be as component info the top of t | plete and accurate as permation. If more space of any additional page is have any executory of the control of the information and parately each person for example, rent, vehically contracts and unexperson or company with the steiner Ranch | possible. If two marries is needed, copy the s, write your name an contracts or unexpired lile this form with the comation below even if the company with whom cle lease, cell phone). Sired leases. | ed people are filing to additional page, fill in d case number (if known I leases? urt with your other school e contracts or leases at m you have the contract. | egether, both are equally tout, number the entried own). edules. You have nothing are listed on Schedule A/a act or lease. Then state for this form in the instruction. | g else to report on this form B: Property (Official Form 1 e what each contract or lection booklet for more examated or lease is for | ng ge. n. 06A/B). |

TX State **78732** ZIP Code

Austin City

| Fill in this information to identify your case: | | | | | |
|---|-------------------|-------------------------|------------------|--|----------------------------|
| Debtor 1 | Walter | Dean | Marth | | |
| Debtor 2 | First Name Carol | Middle Name Joan | Last Name Marth | | |
| (Spouse, if filing) | | Middle Name | Last Name | | |
| United States Bar | nkruptcy Court fo | or the: WESTERN DIS | STRICT OF TEXAS | | |
| Case number (if known) | | | | | Check if this amended fili |

Official Form 106H

Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

| 1. | Do y | you h No Yes | ave any codebtors? | (If you are filing a | joint case, de | o not list eithe | r spouse a | as a codebtor.) |
|----|------|---------------------------|---------------------------|-------------------------|----------------|------------------|------------|--|
| 2. | | | | | | • | • | (Community property states and territories , Washington, and Wisconsin.) |
| | П | No. | Go to line 3. | | | | | |
| | 집 | Yes | Did your spouse, form | ner spouse, or legal | equivalent li | ve with you at | the time? | ? |
| | ت | П | No | - | | - | | |
| | | | Yes | | | | | |
| | | Į. | In which community st | ate or territory did y | ou live? | Texas | Fill | in the name and current address of that person. |
| | | | Carol Marth | | | | | |
| | | | Name of your spouse, form | ner spouse, or legal eq | uivalent | | | • |
| | | | 4800 Steiner Ranch | n Blvd #3106 | | | | |
| | | | Number Street | | | | | |
| | | | Austin | | TX | 78732 | | |
| | | | City | | State | ZIP Code | | • |

3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

| Fill in this inforr | mation to identify | y your case: | | | | |
|------------------------|---|--------------|---------------------------|----------|-----|---|
| Debtor 1 | Walter | Dean | Marth | | | |
| | First Name | Middle Name | Last Name | | Che | ck if this is: |
| Debtor 2 | Carol | Joan | Marth | | _ | An amended filing |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | Ш | All difference filling |
| United States Bank | United States Bankruptcy Court for the: | | WESTERN DISTRICT OF TEXAS | | | A supplement showing postpetition chapter 13 income as of the following date: |
| Case number (if known) | - | | | | | MM / DD / YYYY |
| 200 : 15 44 | 201 | | | <u>,</u> | | WIWI DD / TTTT |

Official Form 106I

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Employment

| ۱. | Fill in your employment information. | | Debtor 1 | | Debtor 2 or non-fili | ng spouse |
|----|--|-----------------------|---|----------------|---|----------------|
| | If you have more than one job, attach a separate page with information about | Employment status | ☐ Employed✓ Not employed | | ☐ Employed✓ Not employed | |
| | additional employers. | Occupation | Retired | | Retired | |
| | Include part-time, seasonal, or self-employed work. | Employer's name | | | | |
| | Occupation may include student or homemaker, if it applies. | Employer's address | Number Street | | Number Street | |
| | | | | | | |
| | | | City | State Zip Code | City | State Zip Code |
| | | How long employed the | here? | | | |

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

| | | | F | For Debtor 1 | For Debtor 2 or non-filing spouse |
|----|--|----|---|--------------|-----------------------------------|
| 2. | List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. | 2. | | \$0.00 | \$0.00 |
| 3. | Estimate and list monthly overtime pay. | 3. | + | \$0.00 | \$0.00 |
| 4. | Calculate gross income. Add line 2 + line 3. | 4. | | \$0.00 | \$0.00 |

Debtor 1 Walter Dean Marth
Debtor 2 Carol Joan Marth

| Case number (if known) | |
|------------------------|--|
|------------------------|--|

| | | | For Debtor 1 | For Debtor 2 or non-filing spouse |
|-----|---|--------------|---------------------|-----------------------------------|
| | Copy line 4 here | → 4. | \$0.00 | \$0.00 |
| _ | | 7 7. | | <u> </u> |
| 5. | List all payroll deductions: | . | ¢0.00 | ¢0.00 |
| | 5a. Tax, Medicare, and Social Security deductions | 5a. | \$0.00 | <u>\$0.00</u> |
| | 5b. Mandatory contributions for retirement plans | 5b. | \$0.00 | <u>\$0.00</u> |
| | 5c. Voluntary contributions for retirement plans | 5c. | \$0.00 | \$0.00 |
| | 5d. Required repayments of retirement fund loans | 5d. | \$0.00 | \$0.00 |
| | 5e. Insurance | 5e. | \$0.00 | \$0.00 |
| | 5f. Domestic support obligations | 5f. | \$0.00 | \$0.00 |
| | 5g. Union dues | 5g. | \$0.00 | \$0.00_ |
| | 5h. Other deductions. Specify: | 5h. + | \$0.00 | \$0.00 |
| 6. | Add the payroll deductions. Add lines $5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h$. | + 6. | \$0.00 | <u>\$0.00</u> |
| 7. | Calculate total monthly take-home pay. Subtract line 6 from line | 4. 7. | \$0.00 | \$0.00 |
| 8. | List all other income regularly received: | | | |
| | Net income from rental property and from operating a business, profession, or farm | 8a. | \$0.00 | <u>\$0.00</u> |
| | Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. | | | |
| | 8b. Interest and dividends | 8b. | \$0.00 | \$0.00 |
| | 8c. Family support payments that you, a non-filing spouse, or a | 8c. | \$0.00 | \$0.00 |
| | dependent regularly receive Include alimony, spousal support, child support, maintenance, | | | |
| | divorce settlement, and property settlement. | | | |
| | 8d. Unemployment compensation | 8d. | \$0.00 | \$0.00_ |
| | 8e. Social Security | 8e. | \$1,409.00 | <u>\$1,350.00</u> |
| | 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) or any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: | 8f. | \$0.00 | \$0.00 |
| | · · · · · · · · · · · · · · · · · · · | | | |
| | 8g. Pension or retirement income | 8g. | \$2,288.82 | <u>\$3,231.95</u> |
| | 8h. Other monthly income. Specify: | 8h. + | \$0.00 | \$0.00 |
| 9. | Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8 | 8h. 9. | \$3,697.82 | <u>\$4,581.95</u> |
| 10. | Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spous | 10. se. | \$3,697.82 | + \$4,581.95 = \$8,279.77 |
| 11. | State all other regular contributions to the expenses that you list i Include contributions from an unmarried partner, members of your hou friends or relatives. | | | ur roommates, and other |
| | Do not include any amounts already included in lines 2-10 or amounts | that are no | ot available to pay | expenses listed in Schedule J. |
| | Specify: | | | 11. + \$0.00 |
| 12. | Add the amount in the last column of line 10 to the amount in line income. Write that amount on the Summary of Your Assets and Liabil if it applies. | | | |
| 13. | Do you expect an increase or decrease within the year after you fi | ile this for | m? | monthly income |
| | ✓ No. None. | | | |
| | Yes. Explain: | | | |
| | | | | |

| F | ill in this inforn | nation to ider | ntify your case: | | | Cha | als if this | · io. | |
|------|--|---------------------|--|----------------|---|-----|----------------------|-----------------------|---|
| | Debtor 1 | Walter | Dean | Marth | | | ck if this An ame | s is: ended filing | |
| | Debior 1 | First Name | Middle Name | Last Nar | | ╽╎ | | lement showing | postpetition |
| | Debtor 2 | Carol | Joan | Marth | | _ | chapte | r 13 expenses a | |
| | (Spouse, if filing) | First Name | Middle Name | Last Nar | me | | followir | ng date: | |
| | United States Bank | ruptcy Court for tl | he: WESTERN DIS | TRICT OF 1 | TEXAS | | MM / D | D / YYYY | |
| | Case number (if known) | | | | | | | | |
| Of | fficial Form 10 | 06J | | | | | | | |
| Sc | chedule J: Yo | our Expens | es | | | | | | 12/15 |
| cor | rect information. I | If more space is | ible. If two married p needed, attach anoth nswer every question sehold | er sheet to th | | | | | |
| 1. | Is this a joint cas | | | | | | | | |
| 2. | No. Go to lin ✓ Yes. Does ✓ No | Debtor 2 live in a | separate household? file Official Form 106J | | | | | | |
| | Do not list Debtor Debtor 2. | 1 and | Yes. Fill out this in for each dependen | | Dependent's relation Debtor 1 or Debtor | | p to | Dependent's age | Does dependent live with you? |
| | Do not state the d names. | ependents' | | | | | | | Yes No Yes No Yes No Yes No Yes No No No No |
| 3. | Do your expense expenses of peolyourself and you | ple other than | ✓ No ✓ Yes | | | | | | Yes |
| P | art 2: Estima | ate Your Ong | oing Monthly Exp | enses | | | | | |
| to ı | | of a date after t | nkruptcy filing date uhe bankruptcy is filed | - | - | | | - | |
| | | | ash government assis on Schedule I: Your I | | | | | Your expens | ses |
| 4. | | | rpenses for your resident of the ground any rent for the ground th | | | | | 4. | \$1,700.00 |
| | If not included in | | . 0 ** | | | | | | |
| | 4a. Real estate t | axes | | | | | | 4a | |
| | 4b. Property, hor | meowner's, or ren | ter's insurance | | | | | 4b | \$30.00 |
| | 4c. Home mainte | enance, repair, ar | nd upkeep expenses | | | | | 4c | |
| | 4d. Homeowner's | s association or c | condominium dues | | | | | 4d | |

Debtor 1 Walter Dean Marth
Debtor 2 Carol Joan Marth

Carol Joan Marth Case number (if known) Your expenses Additional mortgage payments for your residence, such as home equity loans 5. **Utilities:** 6a. Electricity, heat, natural gas 6a. \$144.00 6b. Water, sewer, garbage collection 6b. 6c. Telephone, cell phone, Internet, satellite, and \$180.00 6c. cable services 6d. 6d. Other. Specify: Food and housekeeping supplies 7. \$800.00 Childcare and children's education costs 8. Clothing, laundry, and dry cleaning 9. \$50.00 10. Personal care products and services 10. \$69.00 11. Medical and dental expenses 11. \$200.00 12. Transportation. Include gas, maintenance, bus or train 12. \$150.00 fare. Do not include car payments. 13. Entertainment, clubs, recreation, newspapers, 13 \$100.00 magazines, and books 14. Charitable contributions and religious donations 14. \$400.00 Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15a. 15b. Health insurance 15b. \$654.60 15c. Vehicle insurance 15c. \$266.66 15d. Other insurance. Specify: 15d. **16.** Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: Estimated monthly tax payments 16. \$300.00 17. Installment or lease payments: 17a. Car payments for Vehicle 1 Car Payment 17a. \$803.82 17b. Car payments for Vehicle 2 17b. \$1,000.00 17c. Other. Specify: Payment for live-in attendant 17c. 17d. Other. Specify: Social Security Backout / Social Security Backout 17d. \$2,759.00 18. Your payments of alimony, maintenance, and support that you did not report as 18. deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 19. Other payments you make to support others who do not live with you. Specify: 19.

| | tor 1 tor 2 | Walter Dean Marth Carol Joan Marth | Case number (if know | n) |
|-----|----------------|---|----------------------|--------------|
| 20. | | real property expenses not included in lines 4 or 5 of this form or on dule I: Your Income. | | |
| | 20a. | Mortgages on other property | 20a. | |
| | 20b. | Real estate taxes | 20b. | |
| | 20c. | Property, homeowner's, or renter's insurance | 20c. | |
| | 20d. | Maintenance, repair, and upkeep expenses | 20d. | |
| | 20e. | Homeowner's association or condominium dues | 20e. | |
| 21. | Other | . Specify: | 21. | + |
| 22. | Calcu | late your monthly expenses. | | |
| | 22a. | Add lines 4 through 21. | 22a. | \$9,607.08 |
| | 22b. | Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2. | 22b. | |
| | 22c. | Add line 22a and 22b. The result is your monthly expenses. | 22c. | \$9,607.08 |
| 23. | Calcu | late your monthly net income. | | |
| | 23a. | Copy line 12 (your combined monthly income) from Schedule I. | 23a. | \$8,279.77 |
| | 23b. | Copy your monthly expenses from line 22c above. | 23b. | \$9,607.08 |
| | 23c. | Subtract your monthly expenses from your monthly income. The result is your monthly net income. | 23c. | (\$1,327.31) |
| 24. | Do yo | ou expect an increase or decrease in your expenses within the year after you | file this form? | |
| | | kample, do you expect to finish paying for your car loan within the year or do you e ent to increase or decrease because of a modification to the terms of your mortga | . , | |
| | Ξ. | No. Yes. Explain here: None. | | |
| | | | | |

| Fill in this information to identify your case: | | | | | |
|---|------------------------|---------------|---------------|--|--|
| Debtor 1 | Walter | Dean | Marth | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | Carol | Joan | Marth | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | |
| | nkruptcy Court for the | WESTERN DISTR | RICT OF TEXAS | | |
| Case number | | | | | |
| (if known) | | | | | |

☐ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

Part 1: Summarize Your Assets

| 1. | Schedule A/B: Property (Official Form 106A/B) | Your assets Value of what you own |
|----|--|--------------------------------------|
| | 1a. Copy line 55, Total real estate, from Schedule A/B | \$0.00 |
| | 1b. Copy line 62, Total personal property, from Schedule A/B | \$15,328.11 |
| | 1c. Copy line 63, Total of all property on Schedule A/B | \$15,328.11 |
| В | art 2: Summarize Your Liabilities | |

Your liabilities Amount you owe

| 2. | 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$34,000.00 |
|----|--|-------------|
| 3. | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) | |

\$3,500.00 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F..... \$250,469.00 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F.....+

Your total liabilities

\$287,969.00

Summarize Your Income and Expenses Part 3:

| 4. | Copy your combined monthly income from line 12 of Schedule I | \$8,279.77 |
|----|---|------------|
| 5. | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J | \$9,607.08 |

| | otor 1 otor 2 | Walter Dean Marth Carol Joan Marth | Case number (if known) | | |
|----|------------------|---|--|---------------------|--|
| F | art 4: | Answer These Questions for Administrative and Stati | istical Records | | |
| 6. | Are yo | ou filing for bankruptcy under Chapters 7, 11, or 13? | | | |
| | | lo. You have nothing to report on this part of the form. Check this box and | nd submit this form to the court with yo | ur other schedules. | |
| 7. | What k | kind of debt do you have? | | | |
| | <u> </u> | Your debts are primarily consumer debts. Consumer debts are those "iamily, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for s | | a personal, | |
| | | Your debts are not primarily consumer debts. You have nothing to repons form to the court with your other schedules. | ort on this part of the form. Check this | box and submit | |
| 8. | | the Statement of Your Current Monthly Income: Copy your total current I Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line | • | \$5,520.77 | |
| 9. | Copy t | the following special categories of claims from Part 4, line 6 of Sche | dule E/F: | | |
| | | | Total claim | | |
| | - | Deat A are Oak a hale E/E a consider fall south a | | | |

| | | Total Claim |
|-----|--|-------------|
| Fro | m Part 4 on Schedule E/F, copy the following: | |
| 9a. | Domestic support obligations. (Copy line 6a.) | \$0.00 |
| 9b. | Taxes and certain other debts you owe the government. (Copy line 6b.) | \$3,500.00 |
| 9c. | Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$0.00 |
| 9d. | Student loans. (Copy line 6f.) | \$0.00 |
| 9e. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$0.00 |
| 9f. | Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$0.00 |
| 9g. | Total. Add lines 9a through 9f. | \$3,500.00 |

| Fill in this inf | ormation to ider | | | |
|---------------------------|------------------------|---------------------|--------------------|------------------------------------|
| Debtor 1 | Walter First Name | Dean Middle Name | Marth Last Name | |
| Debtor 2 | Carol | Joan | Marth | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | |
| United States Bar | nkruptcy Court for the | | | |
| Case number (if known) | | | | Check if this is ar amended filing |

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both, 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| ou, out, or imprisonment for up to 20 years, | or both. 18 U.S.C. 99 152, 1341, 1519, and 3571. |
|--|--|
| Sign Below | |
| Did you pay or agree to pay someone wh | o is NOT an attorney to help you fill out bankruptcy forms? |
| ☑ No | |
| Yes. Name of person | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |
| | |
| | |
| | |
| Under penalty of perjury, I declare that I have and correct. | nave read the summary and schedules filed with this declaration and that they are |
| | |
| X /s/ Walter Dean Marth | X /s/ Carol Joan Marth |
| Walter Dean Marth, Debtor 1 | Carol Joan Marth, Debtor 2 |
| Date 02/04/2019 | Date 02/04/2019 |
| MM / DD / YYYY | MM / DD / YYYY |

| Debtor 1 | Walter | Dean | Marth | | |
|--|--|---|---|---|-------|
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | Carol | Joan | Marth | _ | |
| Spouse, if fil | ing) First Name | Middle Name | Last Name | | |
| Jnited States | Bankruptcy Court fo | or the: WESTERN DIS | STRICT OF TEXAS | _ | |
| Case number | | | | ☐ Check if this is an | |
| if known) | | | | amended filing | |
| fficial Fo | rm 107 | | | | |
| | - | Affaire for Ind | lividuals Filing for | Pankruptov | 04/1 |
| latemen | t di Filialicia | Allalis IOI IIIU | iividuais Filling Ioi | Банкгирісу | 04/10 |
| • | | | | r, both are equally responsible for supplying | |
| orrect inform our name and | ation. If more spaced case number (if k | e is needed, attach a nown). Answer every | separate sheet to this form. | On the top of any additional pages, write | |
| orrect informour name and | ation. If more spaced case number (if k | e is needed, attach a nown). Answer every out Your Marital S | separate sheet to this form. question. | On the top of any additional pages, write | |
| orrect informour name and | ation. If more spaced case number (if k Give Details Ab our current marital | e is needed, attach a nown). Answer every out Your Marital S | separate sheet to this form. question. | On the top of any additional pages, write | |
| orrect inform our name and Part 1: What is y | ation. If more spaced case number (if k Give Details Ab our current marital | e is needed, attach a nown). Answer every out Your Marital S | separate sheet to this form. question. | On the top of any additional pages, write | |
| Part 1: What is y Marrie | ation. If more spaced case number (if k Give Details Ab our current marital ad arried | e is needed, attach a nown). Answer every out Your Marital S status? | separate sheet to this form. question. | On the top of any additional pages, write | |
| Part 1: What is your note the During the No | ation. If more spaced case number (if k Give Details Ab our current marital ad arried e last 3 years, have | e is needed, attach a nown). Answer every out Your Marital S status? you lived anywhere o | separate sheet to this form. question. Status and Where You other than where you live no | On the top of any additional pages, write Lived Before | |
| Part 1: What is your not make and the part is what is your marked in the part is when it is not make the part is when it is not make the part is not make t | ation. If more spaced case number (if k Give Details Ab our current marital ad arried e last 3 years, have | e is needed, attach a nown). Answer every out Your Marital S status? you lived anywhere o | separate sheet to this form. question. Status and Where You | On the top of any additional pages, write Lived Before | |
| Part 1: What is your Not more than the property of the proper | ation. If more spaced case number (if k Give Details Ab our current marital ad arried e last 3 years, have List all of the places e last 8 years, did y | te is needed, attach a nown). Answer every out Your Marital Satatus? you lived anywhere of you lived in the last 3 you ever live with a specific power or the satatus. | separate sheet to this form. question. Status and Where You other than where you live no years. Do not include where youse or legal equivalent in a | On the top of any additional pages, write Lived Before | |

Washington, and Wisconsin.)

□ No ☑ Yes. Make sure you fill out *Schedule H: Your Codebtors* (Official Form 106H).

| Debtor 1 Debtor 2 | | Walter Dean Marth Carol Joan Marth Case number (if known) | | | | | | | | |
|----------------------|---|---|--|--|--------------------------------------|--|--|--|--|--|
| Р | art 2: | Explain the Sources of | Your Income | | | | | | | |
| 4. | Fill in the | have any income from employ e total amount of income you rec e filing a joint case and you have | eived from all jobs and all l | businesses, including par | t-time activities. | calendar years? | | | | |
| | ☑ No ☐ Yes | . Fill in the details. | | | | | | | | |
| 5. | Include unemplo | receive any other income duri income regardless of whether that syment; and other public benefit a abling and lottery winnings. If you | at income is taxable. Exampayments; pensions; rental | nples of other income are income; interest; dividen | ds; money collected from | lawsuits; royalties; | | | | |
| | List each source and the gross income from each source separately. Do not include income that you listed in line 4. | | | | | | | | | |
| | □ No ☑ Yes | . Fill in the details. | | | | | | | | |
| | | | Debtor 1 | | Debtor 2 | | | | | |
| | | | Sources of income Describe below. | Gross income from each source (before deductions and exclusions | Sources of income Describe below. | Gross income from each source (before deductions and exclusions | | | | |
| Fro | m .lanuai | y 1 of the current year until | Pension | \$2,288.82 | Pension | \$3,231.95 | | | | |
| | | filed for bankruptcy: | SSI Benefits | \$1,543.00 | SSI Benefits | \$1,484.00 | | | | |
| For | the last | calendar year: | Pension | \$27,465.84 | Pension | \$37,783.40 | | | | |
| | | December 31, 2018) | SSI Benefits | \$18,516.00 | SSI Benefits | \$17,808.00 | | | | |
| For | the cale | ndar year before that: | Pension | \$27,465.84 | | \$37,783.40 | | | | |
| | | December 31, <u>2017</u>) | SSI Benefits | \$18,516.00 | SSI Benefits | \$17,808.00 | | | | |

| | | Walter Dean Marth Carol Joan Marth Case number (if known) | | | | | | |
|----|-----------------------------------|---|--|--|--|--|--|--|
| P | art 3: | List Certain Payments You Made Before You Filed for Bankruptcy | | | | | | |
| 6. | Are eith | er Debtor 1's or Debtor 2's debts primarily consumer debts? | | | | | | |
| | □ No. | Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." | | | | | | |
| | | During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? | | | | | | |
| | | □ No. Go to line 7. | | | | | | |
| | | Yes. List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. | | | | | | |
| | | * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. | | | | | | |
| | ✓ Yes. | Debtor 1 or Debtor 2 or both have primarily consumer debts. | | | | | | |
| | | During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? | | | | | | |
| | | ☑ No. Go to line 7. | | | | | | |
| | | Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. | | | | | | |
| 7. | Insiders corporat agent, in | year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; ions of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing cluding one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations child support and alimony. | | | | | | |
| | ✓ No ☐ Yes. | List all payments to an insider. | | | | | | |
| 8. | | year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that d an insider? | | | | | | |
| | Include | payments on debts guaranteed or cosigned by an insider. | | | | | | |
| | ✓ No ☐ Yes. | List all payments that benefited an insider. | | | | | | |

| Debtor 1 Debtor 2 | | Walter Dean Marth Carol Joan Marth | | Case nun | Case number (if known) | | | |
|---|---------------|---|--|-------------------------------|------------------------|------------------|---------------|--|
| P | art 4: | Identify Legal Act | tions, Repossessions, and | d Foreclosures | | | | |
| Within 1 year before you filed for bankruptcy, were you a p List all such matters, including personal injury cases, small cla modifications, and contract disputes. | | | | • | | - | - | |
| | □ No ☑ Yes | s. Fill in the details. | | | | | | |
| Cas | e title | | Nature of the case | Court or agen | су | Statu | s of the case | |
| Am Ma | | Express vs Carol | Suit on Debt | In the Count Travis Coun | y Court at Law | v No 1 of | ✓ Pending | |
| IVIG | | | | Court Name | ty, rexus | | On appeal | |
| Cas | e numbe | er <u>C-1-CV-18-012018</u> | _ | Number Stree | t | | ☐ Concluded | |
| | | | | - | | | | |
| | | | | City | State | ZIP Code | | |
| | Seized, Check | or levied? all that apply and fill in the Go to line 11. s. Fill in the information b | | or, including a bank or fina | | | | |
| | ✓ No ☐ Yes | s. Fill in the details. | | | | | | |
| 12. | | • | for bankruptcy, was any of your ceiver, a custodian, or another | | on of an assigne | e for the benefi | t of | |
| | ✓ No □ Yes | | | | | | | |
| P | art 5: | List Certain Gifts | and Contributions | | | | | |
| 13. | Within | 2 years before you filed | for bankruptcy, did you give ar | ny gifts with a total value o | of more than \$60 | 00 per person? | | |
| | ✓ No ☐ Yes | s. Fill in the details for ea | ach gift. | | | | | |

| Debtor 1 Debtor 2 | Walter Dear | | h | | Case number (if I | known) | | |
|--------------------------|---|-------------|-----------------------|------------------|---|---|-------------------|--|
| | Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? | | | | | | | |
| | No Yes. Fill in the de | etails fo | r each gift | or contribution. | | | | |
| | ontributions to o | charitie | s | | Describe what you contributed \$400 approximately given to church | Date you contributed | Value | |
| Lutheran Charity's Na | | | | | - | | _ | |
| Number | Street | | | | - | | | |
| Austin | | | TX | 71D O - d - | - | | | |
| City | | | State | ZIP Code | | | | |
| Part 6: | List Certa | aiii LO | 3363 | | | | | |
| other ☑ N | r disaster, or ga | mbling | | kruptcy or sind | ce you filed for bankruptcy, did you lose an | yumig because of u | ien, ine, | |
| Part 7: | Ves. Fill in the de | | yments | or Transfers | s | | | |
| anyo | ne you consulte | ed abou | ıt seeking | bankruptcy or | ou or anyone else acting on your behalf pay preparing a bankruptcy petition? | | | |
| Includ | de any attorneys, | , bankru | ptcy petition | on preparers, or | r credit counseling agencies for services requir | red for your bankrupt | cy. | |
| | No /es. Fill in the de | etails. | | | | | | |
| Law Office Person Who | ces of Douglas | s J. Po | well, P.C | • | on and value of any property transferred | Date payment or transfer was made | Amount of payment | |
| 820 Wes | t 10th Street | | | | | 02/01/2019 | \$2,335.00 | |
| Number | Street | | | | | | | |
| Austin City | | TX State | 78701 ZIP Code | | | | | |
| 9 | | | , | | | | | |
| Email or wel | bsite address | | | | | | | |
| Person Who | o Made the Paymen | t, if Not \ | ⁄ou | | | | | |

| | tor 1 tor 2 | Walter Dea Carol Joan | | | | Case number (| (if known) | | | |
|---------|--|---------------------------------|---------------|---------------|--|-------------------------------|---|---|--|--|
| 17. | | | - | | ruptcy, did you or anyone else acting on your behalf pay or transfer any property to I with your creditors or to make payments to your creditors? | | | | | |
| | Do not include any payment or transfer that you listed on line 16. | | | | | | | | | |
| | ✓ No | s. Fill in the de | etails. | | | | | | | |
| 18. | | - | - | | uptcy, did you sell, trade, or se of your business or finan | • | property to anyone, oth | er than | | |
| | | - | | | s made as security (such as grave already listed on this stat | • | est or mortgage on your p | roperty). | | |
| | □ No ☑ Ye | s. Fill in the de | etails. | | | | | | | |
| _ | | | | | Description and value of a property transferred | • | y property or payments debts paid in exchange | Date transfer was made | | |
| | ald Mar on Who F | rth Received Transfei | - | | On an average monthly | | debis paid in exchange | monthly | | |
| | Kristi I | | | | Debtors transfer approx | | | | | |
| Num | | reet | | | \$1,500.00 per month that son uses to pay bills an | | | | | |
| 103 | паттіѕ | Ave Apt B | | | | expenses on their behalf. | | | | |
| Aus | stin | | TX | 78705 | _ | | | | | |
| City | | | State | ZIP Code | | | | | | |
| Pers | son's rela | ationship to yo | u <u>Son</u> | | - | | | | | |
| 19. | | - | - | | ruptcy, did you transfer any called asset-protection device | | d trust or similar device | of which | | |
| | you an | • | <i>,</i> : (1 | nese are onen | r called asset-protection device | es.) | | | | |
| | <u> </u> | s. Fill in the de | etails. | | | | | | | |
| Pa | art 8: | List Certa | ain Fi | nancial Acc | counts, Instruments, Sa | afe Deposit Boxes, a | and Storage Units | | | |
| 20. | Within | 1 year before | you fil | ed for bankru | ptcy, were any financial acc | ounts or instruments he | ld in your name, or for y | /our | | |
| | | t, closed, sold | • | · | | | | | | |
| | | - | - | • | or other financial accounts; ce ciations, and other financial in | · | es in banks, credit unions | , brokerage | | |
| | □ No ✓ Ye | s. Fill in the de | etails. | | | | | | | |
| 0 | DI- | | | | Last 4 digits of account number | Type of account or instrument | Date account was closed, sold, moved, or transferred | Last balance before closing or transfer | | |
| | Bank e of Finar | ncial Institution | | | - | _ 0, 1: | | * 0.00 | | |
| | | | | | _ xxxx | | unknown | \$0.00 | | |
| Num | ber St | reet | | | | ☐ Money market | | | | |
| | | | | | _ | ☐ Brokerage | | | | |
| <u></u> | | | Ctat - | 7ID Co 1- | - | Other | | | | |
| City | | | State | ZIP Code | | | | | | |

| | tor 1 tor 2 | Walter Dean Marth Carol Joan Marth Case number (if known) | | | | |
|-----|-----------------|---|--|--|--|--|
| 21. | - | ow have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository ities, cash, or other valuables? | | | | |
| | ✓ No ☐ Yes | s. Fill in the details. | | | | |
| 22. | ☑ No | ou stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? 5. Fill in the details. | | | | |
| P | art 9: | Identify Property You Hold or Control for Someone Else | | | | |
| 23. | • | hold or control any property that someone else owns? Include any property you borrowed from, are storing for, in trust for someone. | | | | |
| | ✓ No ☐ Yes | s. Fill in the details. | | | | |
| Pa | art 10: | Give Details About Environmental Information | | | | |
| For | the purp | ose of Part 10, the following definitions apply: | | | | |
| ŀ | nazardou | nental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of is or toxic substance, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, is statutes or regulations controlling the cleanup of these substances, wastes, or material. | | | | |
| | | ns any location, facility, or property as defined under any environmental law, whether you now own, operate, or or used to own, operate, or utilize it, including disposal sites. | | | | |
| | | us material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic se, hazardous material, pollutant, contaminant, or similar item. | | | | |
| Rep | ort all no | otices, releases, and proceedings that you know about, regardless of when they occurred. | | | | |
| 24. | Has any law? | y governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental | | | | |
| | ✓ No ☐ Yes | . Fill in the details. | | | | |
| 25. | ☑ No | ou notified any governmental unit of any release of hazardous material? . Fill in the details. | | | | |
| 26. | Have yo | ou been a party in any judicial or administrative proceeding under any environmental law? Include settlements and | | | | |
| | ✓ No ☐ Yes | s. Fill in the details. | | | | |

| Debi | | Walter Dean Marth Carol Joan Marth | Case number (if known) |
|------|----------------|--|--|
| Pa | art 11: | Give Details About Your Business or | Connections to Any Business |
| 27. | Within busines | | own a business or have any of the following connections to any |
| | | A sole proprietor or self-employed in a trade, profe A member of a limited liability company (LLC) or lin A partner in a partnership An officer, director, or managing executive of a column An owner of at least 5% of the voting or equity sec | rporation |
| 28. | Yes | None of the above applies. Go to Part 12. Check all that apply above and fill in the details be years before you filed for bankruptcy, did you go ncial institutions, creditors, or other parties. | elow for each business. |
| | □ No □ Yes | s. Fill in the details below. | |

| Debtor 1 Debtor 2 | Walter Dean Marth Carol Joan Marth | | Case number (if known) |
|----------------------|---------------------------------------|---|---|
| Part 12 | : Sign Below | | |
| that answer | ers are true and correct. I under | stand that making a false st nkruptcy case can result in f | attachments, and I declare under penalty of perjury atement, concealing property, or obtaining money or ines up to \$250,000, or imprisonment for up to 20 years, |
| X /s/ Wa | lter Dean Marth | X /s/ Carol Joa | an Marth |
| Walter | Dean Marth, Debtor 1 | Carol Joan Ma | orth, Debtor 2 |
| Date _ | 02/04/2019 | Date | 4/2019 |
| Did you at | tach additional pages to Your S | atement of Financial Affairs | for Individuals Filing for Bankruptcy (Official Form 107)? |
| ✓ No ☐ Yes | | | |
| Did you pa | ay or agree to pay someone who | is not an attorney to help y | ou fill out bankruptcy forms? |
| √ No | | | |
| | Name of person | | Attach the Bankruptcy Petition Preparer's Notice, |
| _ | _ | | Declaration, and Signature (Official Form 119). |

| Debtor 1 | Walter | Dean | Marth | | | | | |
|--|--|--|--|--|--|--|---|----------------|
| | First Name | Middle Name | Last Nar | ne | - | | | |
| Debtor 2 | Carol | Joan | Marth | | _ | | | |
| (Spouse, if filing) |) First Name | Middle Name | Last Nar | ne | | | | |
| United States Ba | nkruptcy Court fo | or the: WESTERN D | ISTRICT OF | TEXAS | _ | | | |
| Case number (if known) | | | | | | | Check if thi amended fi | |
| Official Form | 108 | | | | | | | |
| tatement o | of Intention | for Individual | s Filing l | Jnder Chap | oter 7 | | | 12/1 |
| | | | | | | | | |
| | _ | er chapter 7, you mu | | TOPM IT: | | | | |
| creditors have | claims secured | by your property, or | • | | | | | |
| you have lease | ed personal pro | perty and the lease h | as not expire | d. | | | | |
| creditors, which | | ourt within 30 days a unless the court ext | | | • | | • | |
| | | | | | | | | |
| oth debtors mus | st sign and date | | | | | | | |
| e as complete a | st sign and date | the form. possible. If more spa | ace is needed | | | | | |
| e as complete a | st sign and date | the form. | ace is needed | | | | | |
| oth debtors must e as complete a dditional pages, | st sign and date nd accurate as p write your nam | the form. possible. If more spa | ace is needed if known). | , attach a separa | | | | |
| e as complete a dditional pages, Part 1: Lis For any cred | st sign and date nd accurate as p write your name | the form. possible. If more spa e and case number (i | ace is needed f known). ecured Clai | , attach a separa | ate sheet to this form | n. On the | top of any |)), |
| e as complete a dditional pages, Part 1: Lis For any cred fill in the info | st sign and date nd accurate as p write your name st Your Credit litors that you list primation below. | the form. cossible. If more space and case number (interest who Hold Section 1) | ace is needed if known). ecured Clai edule D: Cred | , attach a separa | ate sheet to this form Claims Secured by F | n. On the service of | top of any | perty |
| e as complete a diditional pages, Part 1: Lis For any cred fill in the info | st sign and date nd accurate as p write your name st Your Credit litors that you list primation below. | the form. cossible. If more space and case number (interest with the standard stand | ace is needed if known). ecured Clai edule D: Cred teral | ms litors Who Hold What do you interprete that sec | Claims Secured by Fend to do with the cures a debt? | Property (C | of any Official Form 106E you claim the pro xempt on Schedu | perty |
| e as complete a dditional pages, Part 1: Lis For any cred fill in the info Identify the conditions of the condition of the | st sign and date nd accurate as parties your name st Your Credit itors that you list bright and the Kia Motors | the form. cossible. If more space and case number (interest with the standard stand | ace is needed if known). ecured Clai edule D: Cred teral | ms Vhat do you interprete that see Surrender that Retain the property Retain the pro | Claims Secured by F | Property (Constant of the second of the seco | official Form 106E you claim the pro xempt on Schedu | perty |
| e as complete a diditional pages, Part 1: Lis For any cred fill in the info dentify the complete and creditor's name: | st sign and date nd accurate as partie your name st Your Credit itors that you list brimation below. creditor and the Kia Motors f 2016 Hyund | the form. cossible. If more space and case number (interpretation of the standard s | ace is needed if known). ecured Clai edule D: Cred teral | ms Vhat do you interpreted that see Surrender the Retain the property Reaffirmation | Claims Secured by Fand to do with the cures a debt? The property and redeem its reperty and enter into | Property (Constant of the second of the seco | of any Official Form 106E you claim the pro xempt on Schedu | perty |
| e as complete a diditional pages, Part 1: Lis For any cred fill in the info dentify the complete and comple | st sign and date nd accurate as partie your name st Your Credit itors that you list brimation below. creditor and the Kia Motors f 2016 Hyund | the form. cossible. If more space and case number (interpretation of the standard s | ace is needed if known). ecured Clai edule D: Cred teral | ms litors Who Hold What do you interprete that see Surrender th Retain the precedent that the precedent t | Claims Secured by Form to do with the cures a debt? The property and redeem its property and enter into the Agreement. | Property (Constant of the second of the seco | of any Official Form 106E you claim the pro xempt on Schedu | perty |
| e as complete a dditional pages, Part 1: Lis For any cred fill in the info dentify the complete a | st sign and date nd accurate as partie your name st Your Credit litors that you list brimation below. creditor and the Kia Motors f 2016 Hyund | the form. cossible. If more space and case number (interpretation of the standard s | ace is needed if known). ecured Clai edule D: Cred teral | ms litors Who Hold What do you interprete that see the property | Claims Secured by Form to do with the cures a debt? The property and redeem its property and enter into the Agreement. | Property (Constant of the second of the seco | of any Official Form 106E you claim the pro xempt on Schedu | perty |
| e as complete a diditional pages, Part 1: Lis For any cred fill in the info dentify the complete a property securing debte and unexpired in the information of the complete and the complete an | st sign and date nd accurate as parties your Credit st Your Credit litors that you list bromation below. creditor and the Kia Motors f 2016 Hyund tit st Your Unexplain of the personal propetion below. Do not the personal propetion below. | the form. cossible. If more space and case number (interest with the steed in Part 1 of School property that is collar Finance dai Sonata PHEV | ecured Clai edule D: Cred teral coperty Lea | ms litors Who Hold What do you interprete that see | Claims Secured by Fand to do with the cures a debt? The property and redeem it to perty and enter into a Agreement. To perty and [explain]: The property and [explain]: | Property (Control of the second of the secon | Official Form 106E you claim the pro xempt on Schedu No Yes | perty le C? |
| e as complete a diditional pages, Part 1: Lis For any cred fill in the info dentify the complete a property securing debits or any unexpired in the informate ended. You in the ended of the determined the complete as a complete and the complete as a com | st sign and date nd accurate as parties your Credit st Your Credit litors that you list brimation below. creditor and the Kia Motors f 2016 Hyund tit st Your Unexpand personal propetion below. Do not any assume an income and assume an income assume assum | the form. cossible. If more space and case number (interest with the steel in Part 1 of School property that is collar simples of the steel in Part 1 of School property that is collar simples of the steel in Part 1 of School property that is collar simples of the steel in Part 1 of School property that is collar simples of the steel in the | ecured Clai edule D: Cred teral coperty Lea | ms litors Who Hold What do you interprete that see | Claims Secured by Fand to do with the cures a debt? The property and redeem it to perty and enter into a Agreement. To perty and [explain]: The property and [explain]: | Property (CDid as e | Official Form 106E you claim the pro xempt on Schedu No Yes | perty le C? |

property:

Description of leased Residential Lease Date Lease Began: 3/1/2018

Date Scheduled to End: 4/30/2019

□ No ▼ Yes

| Debtor 1 Debtor 2 | Trailor Boart martin | | | Case number (if known) | |
|----------------------|---|---------|-------------------------|---|--|
| Part 3: | Sign Below | | | | |
| | penalty of perjury, I declare that al property that is subject to an u | | y intention about any | property of my estate that secures a debt and | |
| X /s/ Wal | ter Dean Marth | X /s/ 0 | Carol Joan Marth | | |
| Walter I | Dean Marth, Debtor 1 | Card | ol Joan Marth, Debtor 2 | 2 | |
| Date C | 02/04/2019 | Date | 02/04/2019 | | |
| <u></u> | MM / DD / YYYY | | MM / DD / YYYY | | |

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

- You are an individual filing for bankruptcy, and
- Your debts are primarily consumer debts.
 Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 -- Liquidation
- Chapter 11 -- Reorganization
- Chapter 12 -- Voluntary repayment plan for family farmers or fishermen
- Chapter 13 -- Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

| + | \$75 | filing fee administrative fee trustee surcharge |
|---|-------|---|
| | \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that the even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans:
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form--the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form-sometimes called the *Means Test*--deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If your income is more than the median income

for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

| + | | filing fee administrative fee |
|---|---------|----------------------------------|
| | \$1,717 | total fee |

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| + | | filing fee administrative fee |
|---|-------|----------------------------------|
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| + | | filing fee administrative fee |
|---|-------|----------------------------------|
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes,
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and local rules of the court.

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury--either orally or in writing--in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together-called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from:

http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html.

In Alabama and North Carolina, go to:

 $\frac{http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/Bankruptcy/Resources/ApprovedCreditAndDebtCounselors.aspx.}{}$

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

B2030 (Form 2030) (12/15)

UNITED STATES BANKRUPTCY COURT WESTERN DISTRICT OF TEXAS AUSTIN DIVISION

In re Walter Dean Marth
Carol Joan Marth
Chanter 7

| | | Chapter | 7 | |
|----|--|---------------|--------------------|-----------------|
| | DISCLOSURE OF COMPENSATION OF ATTORN | EY FOR | R DEBTOR | |
| 1. | Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the at that compensation paid to me within one year before the filing of the petition in bank services rendered or to be rendered on behalf of the debtor(s) in contemplation of c is as follows: | cruptcy, or | agreed to be pa | aid to me, for |
| | For legal services, I have agreed to accept | \$ | 2,000.00 | |
| | Prior to the filing of this statement I have received | \$ | 2,000.00 | |
| | Balance Due | | \$0.00 | |
| 2. | The source of the compensation paid to me was: | | | |
| | ✓ Debtor Other (specify) | | | |
| 3. | The source of compensation to be paid to me is: | | | |
| | ✓ Debtor Other (specify) | | | |
| 4. | I have not agreed to share the above-disclosed compensation with any other p associates of my law firm. | erson unle | ess they are me | mbers and |
| | I have agreed to share the above-disclosed compensation with another person associates of my law firm. A copy of the agreement, together with a list of the r compensation, is attached. | • | | |
| 5. | In return for the above-disclosed fee, I have agreed to render legal service for all as | spects of the | ne bankruptcy c | ase, including: |
| | a. Analysis of the debtor's financial situation, and rendering advice to the debtor in bankruptcy; | determinir | ng whether to file | e a petition in |
| | b. Preparation and filing of any petition, schedules, statements of affairs and plan w | vhich may | be required; | |
| | c. Representation of the debtor at the meeting of creditors and confirmation hearing | g, and any | adjourned hea | rings thereof; |

| R2030 | (Form | 20301 | (12/15) |
|-------|-------|-------|---------|
| | | | |

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

> 02/04/2019 /s/ Douglas J. Powell

Douglas J. Powell
The Law Offices of Douglas J. Powell, P.C. Date Bar No. 16194900

820 West 10th Street Austin, TX 78701

Phone: (512) 476-2457 / Fax: (512) 477-4503

| /s/ Walter Dean Marth | /s/ Carol Joan Marth |
|-----------------------|----------------------|
| Walter Dean Marth | Carol Joan Marth |

UNITED STATES BANKRUPTCY COURT WESTERN DISTRICT OF TEXAS AUSTIN DIVISION

IN RE: Walter Dean Marth Carol Joan Marth

Date <u>2/4/20</u>19

CASE NO

CHAPTER 7

VERIFICATION OF CREDITOR MATRIX

| | The above named Debtor hereby verifies that the attached list of creditors is true and correct to the best of his/her | | | | | | | |
|--------|---|-----------|-----------------------|--|--|--|--|--|
| knowle | edge. | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| Date 2 | 2/4/2019 | Signature | /s/ Walter Dean Marth | | | | | |
| | _ | 9 | Walter Dean Marth | | | | | |
| | | | | | | | | |
| | | | | | | | | |

Signature /s/ Carol Joan Marth

Carol Joan Marth

American Express PO Box 981537 El Paso, TX 79998-1537

Amex Dept Store (Macy's) PO Box 8218 Mason, OH 45040

Autin-Travis County EMS 15 Waller St, 2nd Floor Austin, TX 78702-5240

Avant, Inc. 222 N LaSalle St, Ste 1700 Chicago, IL 60601

Bank of America PO Box 982238 El Paso, TX 79998

Califf & Harper, P.C. Steven L. Nelson PO Box 719 Moline, IL 61266

Capital One Bank USA PO Box 30281 Salt Lake City, UT 84130-0281

Chase Card Services Attn: Bankruptcy PO Box 15298 Wilmington, DE 19850-5298

Citicards/CBNA PO Box 6190 Sioux Falls, SD 57117-6190 Citicards/CBNA PO Box 6241 Sioux Falls, SD 57117-6241

Comenity /Christopher & Banks PO Box 182789 Columbus, OH 43218

Comenity Capital Bank/Toyota Rewards PO Box 183043 Columbus, OH 43218-3043

Frontline Asset 2700 Snelling Ave N STE 250 Roseville, MN 55113

GC Services Limited Partnership 6330 Gulfton Houston, TX 77081

H&R Accounts 5320 22nd Ave #672 Moline, IL 61266-0672

Internal Revenue Service Centralized Insolvency Operations PO Box 7346 Philadelphia, PA 19101-7346

Kia Motors Finance PO Box 20835 Fountain Valley, CA 92728-0835

LVNV Funding, LLC PO Box 1269 Greenville, SC 29602 Macy's

Attn: Bankruptcy Processing

PO Box 8218 Mason, OH 45040

Midland Credit Management 2365 Northside Dr., ste 300 San Diego, CA 92108

Nordstrom TD Bank 13531 E. Caley Ave Englewood, CO 80111

PayPal Credit PO Box 5138 Timonium, MD 21904

PayPal Credit/Comenity Capital Bank Bankruptcy Department PO Box 183043 Columbus, OH 43218-3043

PayPal Smart Connect/SYNCB Attn: Bankruptcy Dept. PO Box 965060 Orlando, FL 32896-5060

Sears/CBNA P.O. Box 6282 Sioux Falls, SD 57117-6282

Synchrony Bank/JC Penney Attn: Bankruptcy Dept. PO Box 965007 Orlando, FL 32896-50007

United Collection Bureau 5620 Southwyck Blvd Ste 206 Toledo, OH 43614 United States Department of Justice United States Attorney 601 N.W. Loop 410, Suite 600 San Antonio, TX 78216

United States Trustee 903 San Jacinto, Suite 230 Austin, TX 78701

USBank PO Box 108 St Louis, MO 63166

Von Maur 6565 Brady Street Davenport, IA 52806

Zwicker & Associates 1 Chisholm Trail Suite 301 Round Rock, TX 78681

| Fill in this inf | ormation to | identify your case | Check one box only as directed in this | |
|---|-------------|---|---|---|
| Debtor 1 Debtor 2 (Spouse, if filing) United States Bar Case number (if known) | | Dean Middle Name Joan Middle Name or the: WESTERN DIS | Marth Last Name Marth Last Name STRICT OF TEXAS | form and in Form 122A-1Supp: 1. There is no presumption of abuse. 2. The calculation to determine if a presumption of abuse applies will be made under Chapter 7 Means Test Calculation (Official Form 122A-2). 3. The Means Test does not apply now because of qualified military service but it could apply later. |
| | | | | Check if this is an amended filing |

Official Form 122A-1

1.

Chapter 7 Statement of Your Current Monthly Income

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known). If you believe that you are exempted from a presumption of abuse because you do not have primarily consumer debts or because of qualifying military service, complete and file Statement of Exemption from Presumption of Abuse Under § 707(b)(2) (Official Form 122A-1Supp) with this form.

Part 1: Calculate Your Current Monthly Income

| What is your marital and filing status? Check one only. | | | | | | | |
|---|--|--|--|--|--|--|--|
| Not married. Fill out Column A, lines 2-11. | | | | | | | |
| Married and your spouse is filing with you. Fill out both Columns A and B, lines 2-11. | | | | | | | |
| Married and your spouse is NOT filing with you. You and your spouse are: | | | | | | | |
| Living in the same household and are not legally separated. Fill out both Columns A and B, lines 2-11. | | | | | | | |
| Living separately or are legally separated. Fill out Column A, lines 2-11; do not fill out Column B. By checking this box, you declare under penalty of perjury that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are living apart for reasons that do not include evading the Means Test requirements. 11 U.S.C. § 707(b)(7)(B). | | | | | | | |

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

| | | Column A Debtor 1 | Column B Debtor 2 or non-filing spouse |
|----|--|--------------------|---|
| 2. | Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions). | \$0.00 | \$0.00 |
| 3. | Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in. | \$0.00 | \$0.00 |
| 4. | All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed | \$0.00 | \$0.00 |

on line 3.

Debtor 1 Walter Dean Marth
Debtor 2 Carol Joan Marth

Case number (if known)

Column A

Debtor 1

Column B

Debtor 2 or
non-filing spouse

5. Net income from operating a business, profession, or farm

| | Debtor 1 | Debtor 2 | | | |
|--|-----------------|----------|------|--------|--------|
| Gross receipts (before all deductions) | \$0.00 | \$0.00 | - | | |
| Ordinary and necessary operating expenses | \$0.00 | \$0.00 | Сору | | |
| Net monthly income from a business profession, or farm | , \$0.00 | \$0.00 | | \$0.00 | \$0.00 |

6. Net income from rental and other real property

| | Debtor 1 | Debtor 2 | | |
|---|----------|----------|-----------------------|--------|
| Gross receipts (before all deductions) | \$0.00 | \$0.00 | - | |
| Ordinary and necessary operating — expenses | \$0.00 | \$0.00 | Сору | |
| Net monthly income from rental or other real property | \$0.00 | \$0.00 | here \$ \$0.00 | \$0.00 |

7. Interest, dividends, and royalties

Unemployment compensation

| \$0.00 | \$0.00 |
|--------|--------|

\$0.00

\$0.00

Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here:

| For you | \$0.00 |
|-----------------|--------|
| For your spouse | \$0.00 |

Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act. \$2,288.82 \$3,231.95

10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below.

Total amounts from separate pages, if any.

11. Calculate your total current monthly income.

\$2,288.82 + \$3,231.95 = \$5,520.77

Add lines 2 through 10 for each column.

Then add the total for Column A to the total for Column B.

Total current monthly income

| Debtor 1 Debtor 2 | | | /alter Dean Marth arol Joan Marth | | Case number (if known) | |
|----------------------|---|---|--|---|---|--------------|
| P | art 2: | | Determine Whether the Means T | est Applies to You | | |
| 12. | Calcu | ulate | your current monthly income for the year | ear. Follow these steps: | | |
| 12a. | | Copy your total current monthly income from line 11 | | | Copy line 11 here 😝 12a. | \$5,520.77 |
| | | Multiply by 12 (the number of months in a year). | | | | X 12 |
| | 12b. | The | e result is your annual income for this part | of the form. | 12b. | \$66,249.24 |
| 13. | Calcu | ulate | the median family income that applies | to you. Follow these steps | 5: | |
| | Fill in | the s | state in which you live. | Texas | | |
| | Fill in | the r | number of people in your household. | 2 | | |
| | Fill in | the r | median family income for your state and s | ize of household | | \$63,869.00 |
| | To fin | ıd a l | ist of applicable median income amounts, is for this form. This list may also be avail | go online using the link sp | ecified in the separate | |
| 14. | How | do tł | ne lines compare? | | | |
| | 14a. | | Line 12b is less than or equal to line 13. Go to Part 3. | On the top of page 1, che | ck box 1, There is no presumption of abuse. | |
| | 14b. | $\overline{\mathbf{V}}$ | Line 12b is more than line 13. On the to Go to Part 3 and fill out Form 122A-2. | p of page 1, check box 2, | The presumption of abuse is determined by F | form 122A-2. |
| Р | art 3: | | Sign Below | | | |
| | Bys | signir | ng here, I declare under penalty of perjury | that the information on this | s statement and in any attachments is true an | d correct. |
| | V | /o/ \A | Ioltar Doon Marth | V / | c/Caral Joan Marth | |
| | X /s/ Walter Dean Marth Walter Dean Marth, Debtor 1 | | | s/ Carol Joan Marth earol Joan Marth, Debtor 2 | | |
| | Date 2/4/2019 Date | | Pate 2/4/2019 | | | |
| | | | MM / DD / YYYY | | MM / DD / YYYY | |
| | If yo | ou ch | ecked line 14a, do NOT fill out or file Form | | | |

If you checked line 14b, fill out Form 122A-2 and file it with this form.

| Fi | ll in this in | formation to | identify your case: | | | | the appropri | ate box | as directed |
|------|-----------------------------|-----------------------|---|--------------------|----------------------------------|----------------|---------------------|--------------|-------------|
| De | ebtor 1 | Walter | Dean | Marth | | in lines | s 40 or 42: | | |
| | | First Name | Middle Name | Last Name | } | | ng to the calculati | on require | d by this |
| | ebtor 2 pouse, if filing | Carol | Joan Middle Name | Marth Last Name | | Stateme | nt. | | |
| (5) | pouse, il lilling |) First Name | wilddie Name | Last Name | , | ☑ 1. Th | nere is no presum | nption of al | ouse. |
| Ur | nited States Ba | ankruptcy Court for | or the: WESTERN DIS | TRICT OF 1 | EXAS | │ | nere is a presump | otion of abo | use. |
| | ase number known) | | | | | | | | |
| (11 | KIIOWII) | | | | | ☐ Chec | k if this is an ame | ended filinç | j |
| | | | | | | | | | |
| Off | ficial Form | n 122A-2 | | | | | | | |
| Ch | apter 7 N | leans Test | Calculation | | | | | | 04/16 |
| To f | ill out this for | rm, you will need | d your completed copy | of Chapter 7 | Statement of Yo | ur Current I | Monthly Income | (Official F | orm |
| 122 | A-1). | | | | | | | | |
| | | | possible. If two marrie | | | | | | |
| | | • | ed, attach a separate sh of any additional pages | | | | | Iditional | |
| | | | | | | • | , | | |
| Pa | art 1: De | etermine You | r Adjusted Income | | | | | | |
| 1. | Copy your to | otal current mon | thly income | Copy line | 11 from Official | Form 122A | -1 here | 1. | \$5,520.77 |
| 2. | Did you fill o | out Column B in | Part 1 of Form 122A-1? | ? | | | | | |
| | ☐ No. Fill | in \$0 for the total | I on line 3. | | | | | | |
| | ─ Yes. Is | your spouse filing | g with you? | | | | | | |
| | _ | . Go to line 3. | | | | | | | |
| | ☑ ✓ Ye: | s. Fill in \$0 for th | ne total on line 3. | | | | | | |
| 3. | _ | | income by subtracting | any part of | your spouse's in | come not u | sed to pay for | | |
| - | | - | you or your dependent | | • | | p, | | |
| | | | 122A-1, was any amour | | ne you reported fo | r your spous | se NOT regularly | used | |
| | | | | 5! | | | | | |
| | □ No. Fill | in \$0 for the total | I on line 3. | | | | | | |
| | Yes. Fil | II in the information | on below: | | | | | | |
| | | | which the income was | | Fill in the amou | nt you | | | |
| | | | is used to pay your spore other than you or your | uses lax | are subtracting your spouse's in | | | | |
| | depende | ents | | | your spouse's ii | iicome | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | - | | | | - | | | | |
| | | | | | + | | | | |
| | Total | | | | \$(| 0.00 Сару | total here | | \$0.00 |
| | A .15. | | | | tana a Para A | | | | \$5,520.77 |
| 4. | Adjust your | current monthly | income. Subtract the to | otal on line 3 f | rom line 1. | | | | φυ,υΖυ.// |

Debtor 1 Walter Dean Marth
Debtor 2 Carol Joan Marth Case number (if known)

Part 2: Calculate Your Deductions from Your Income

The Internal Revenue Service (IRS) issues National and Local Standards for certain expense amounts. Use these amounts to answer the questions in lines 6-15. To find the IRS standards, go online using the link specified in the separate instructions for this form. This information may also be available at the bankruptcy clerk's office.

Deduct the expense amounts set out in lines 6-15 regardless of your actual expense. In later parts of the form, you will use some of your actual expenses if they are higher than the standards. Do not deduct any amounts that you subtracted from your spouse's income in line 3 and do not deduct any operating expenses that you subtracted from income in lines 5 and 6 of Form 122A-1.

If your expenses differ from month to month, enter the average expense.

Whenever this part of the form refers to you, it means both you and your spouse if Column B of Form 122A-1 is filled in.

5. The number of people used in determining your deductions from income

Fill in the number of people who could be claimed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support. This number may be different from the number of people in your household.

2

National Standards You must use the IRS National Standards to answer the questions in lines 6-7.

6. Food, clothing and other items: Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for food, clothing, and other items.

\$1,202.00

7. Out-of-pocket health care allowance: Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for out-of-pocket health care. The number of people is split into two categories-people who are under 65 and people who are 65 or older--because older people have a higher IRS allowance for health care costs. If your actual expenses are higher than this IRS amount, you may deduct the additional amount on line 22.

| People who are under 65 years of age | | | |
|--|----------|--------------|------------|
| 7a. Out-of-pocket health care allowance per person | \$52.00 | | |
| 7b. Number of people who are under 65 | х | | |
| 7c. Subtotal. Multiply line 7a by line 7b. | \$0.00 | Copy here - | \$0.00 |
| People who are 65 years of age or older | | | |
| 7d. Out-of-pocket health care allowance per person | \$114.00 | | |
| 7e. Number of people who are 65 or older | x2 | | |
| 7f. Subtotal. Multiply line 7d by line 7e. | \$228.00 | Copy here +_ | \$228.00 |
| | | Г | Copy total |

| Debto Debto | | Walter Dea | | |
|----------------|------------|--|---|------------|
| Loc | al St | andards | You must use the IRS Local Standards to answer the questions in lines 8-15. | |
| | | | from the IRS, the U.S. Trustee Program has divided the IRS Local Standard for housing ses into two parts: | |
| | | _ | es Insurance and operating expenses es Mortgage or rent expenses | |
| Тоа | answ | er the question | ons in lines 8-9, use the U.S. Trustee Program chart. | |
| | | | line using the link specified in the separate instructions for this form. This chart may also be otcy clerk's office. | |
| 8. | | - | ties Insurance and operating expenses: Using the number of people you entered in line 5, ount listed for your county for insurance and operating expenses. | \$575.00 |
| 9. | Hou | sing and utiliti | ties Mortgage or rent expenses: | |
| | 9a. | J | mber of people you entered in line 5, fill in the dollar amount listed ty for mortgage or rent expenses. | |
| | 9b. | Total average your home. | e monthly payment for all mortgages and other debts secured by | |
| | | contractually d | the total average monthly payment, add all amounts that are due to each secured creditor in the 60 months after you file for Then divide by 60. | |
| | | Name of the | e creditor Average monthly payment | |
| | | | | |
| | | | | |
| | | | | |
| | | | Total average monthly payment \$0.00 Copy here \(\rightarrow \) \$0.00 Repeat this amount on line 33a. | |
| | 9c. | Net mortgage | e or rent expense. | |
| | | | 9b (total average monthly payment) from line 9a (mortgage or). If this amount is less than \$0, enter \$0. | \$1,489.00 |
| | | | | |
| 10. | | | the U.S. Trustee Program's division of the IRS Local Standard for housing is incorrect alculation of your monthly expenses, fill in any additional amount you claim. | |
| | Exp why | | | |
| | Í | | | |
| 11. | Loc | _ | ion expenses: Check the number of vehicles for which you claim an ownership or operating expense. | |
| | M M | Go to line 1 Go to line 1 | | |
| | | 2 or more. Go | o to line 12. | |
| 12. | | • | expense: Using the IRS Local Standards and the number of vehicles for which you claim the es, fill in the Operating Costs that apply for your Census region or metropolitan statistical area. | \$196.00 |

Debtor 1 Walter Dean Marth Debtor 2 **Carol Joan Marth** Case number (if known) 13. Vehicle ownership or lease expense: Using the IRS Local Standards, calculate the net ownership or lease expense for each vehicle below. You may not claim the expense if you do not make any loan or lease payments on the vehicle. In addition, you may not claim the expense for more than two vehicles. Vehicle 1 Describe Vehicle 1: 2016 Hyundai Sonata PHEV \$497.00 13a. Ownership or leasing costs using IRS Local Standard. 13b. Average monthly payment for all debts secured by Vehicle 1. Do not include costs for leased vehicles. To calculate the average monthly payment here and on line 13e, add all amounts that are contractually due to each secured creditor in the 60 months after you filed for bankruptcy. Then divide by 60. Name of each creditor for Vehicle 1 Average monthly payment **Kia Motors Finance** \$705.79 Repeat this Copy amount on Total average monthly payment \$705.79 \$705.79 here line 33b. Copy net Vehicle 1 13c. Net Vehicle 1 ownership or lease expense. expense Subtract line 13b from line 13a. If this amount is less than \$0, enter \$0. \$0.00 \$0.00 here 🛶 Vehicle 2 Describe Vehicle 2: 13d. Ownership or leasing costs using IRS Local Standard. 13e. Average monthly payment for all debts secured by Vehicle 2. Do not include costs for leased vehicles. Name of each creditor for Vehicle 2 Average monthly payment Repeat this Copy amount on Total average monthly payment here line 33c. Copy net Vehicle 2

14. Public transportation expense: If you claimed 0 vehicles in line 11, using the IRS Local Standards, fill in the Public Transportation expense allowance regardless of whether you use public transportation.

\$0.00

\$0.00

page 4

expense

here -

13f. Net Vehicle 2 ownership or lease expense.

Subtract line 13e from 13d. If this amount is less than \$0, enter \$0.

| Debto | Case number (if known) | |
|-------|--|------------|
| 15. | Additional public transportation expense: If you claimed 1 or more vehicles in line 11 and if you claim that you may also deduct a public transportation expense, you may fill in what you believe is the appropriate expense, but you may not claim more than the IRS Local Standard for Public Transportation. | \$0.00 |
| Oth | er Necessary Expenses In addition to the expense deductions listed above, you are allowed your monthly expenses following IRS categories. | for the |
| 16. | Taxes: The total monthly amount that you will actually owe for federal, state and local taxes, such as income taxes, self-employment taxes, social security taxes, and Medicare taxes. You may include the monthly amount withheld from your pay for these taxes. However, if you expect to receive a tax refund, you must divide the expected refund by 12 and subtract that number from the total monthly amount that is withheld to pay for taxes. | \$300.00 |
| | Do not include real estate, sales, or use taxes. | |
| 17. | Involuntary deductions: The total monthly payroll deductions that your job requires, such as retirement contributions, union dues, and uniform costs. | \$0.00 |
| | Do not include amounts that are not required by your job, such as voluntary 401(k) contributions or payroll savings. | |
| 18. | Life insurance: The total monthly premiums that you pay for your own term life insurance. If two married people are filing together, include payments that you make for your spouse's term life insurance. Do not include premiums for life insurance on your dependents, or a non-filing spouse's life insurance, or for any form of life insurance other than term. | \$0.00 |
| 19. | Court-ordered payments: The total monthly amount that you pay as required by the order of a court or administrative agency, such as spousal or child support payments. | \$0.00 |
| | Do not include payments on past due obligations for spousal or child support. You will list these obligations in line 35. | |
| 20. | Education: The total monthly amount that you pay for education that is either required: ■ as a condition for your job, or | \$0.00 |
| | ■ for your physically or mentally challenged dependent child if no public education is available for similar services. | |
| 21. | Childcare: The total monthly amount that you pay for childcare, such as babysitting, daycare, nursery, and preschool. Do not include payments for any elementary or secondary school education. | \$0.00 |
| 22. | Additional health care expenses, excluding insurance costs: The monthly amount that you pay for health care that is required for the health and welfare of you or your dependents and that is not reimbursed by insurance or paid by a health savings account. Include only the amount that is more than the total entered in line 7. Payments for health insurance or health savings accounts should be listed only in line 25. | \$972.00 |
| 23. | Optional telephones and telephone services: The total monthly amount that you pay for telecommunication services for you and your dependents, such as pagers, call waiting, caller identification, special long distance, or business cell phone service, to the extent necessary for your health and welfare or that of your dependents or for the production of income, if it is not reimbursed by your employer. | + \$0.00 |
| | Do not include payments for basic home telephone, internet and cell phone service. Do not include self-employment expenses, such as those reported on line 5 of Official Form 122A-1, or any amount you previously deducted. | |
| 24. | Add all of the expenses allowed under the IRS expense allowances. Add lines 6 through 23. | \$4,962.00 |

Debtor 1 Walter Dean Marth Debtor 2 Carol Joan Marth Case number (if known) **Additional Expense Deductions** These are additional deductions allowed by the Means Test. Note: Do not include any expense allowances listed in lines 6-24. 25. Health insurance, disability insurance, and health savings account expenses. The monthly expenses for health insurance, disability insurance, and health savings accounts that are reasonably necessary for yourself, your spouse, or your dependents. \$654.60 Health insurance \$0.00 Disability insurance \$0.00 Health savings account \$654.60 \$654.60 Total Copy total here **-**Do you actually spend this total amount? ■ No. How much do you actually spend? ✓ Yes 26. Continuing contributions to the care of household or family members. The actual monthly expenses that you \$0.00 will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses. These expenses may include contributions to an account of a qualified ABLE program. 26 U.S.C. § 529A(b). 27. Protection against family violence. The reasonably necessary monthly expenses that you incur to maintain the \$0.00 safety of you and your family under the Family Violence Prevention and Services Act or other federal laws that apply. By law, the court must keep the nature of these expenses confidential. 28. Additional home energy costs. Your home energy costs are included in your insurance and operating expenses on line 8. If you believe that you have home energy costs that are more than the home energy costs included in expenses on line 8, then fill in the excess amount of home energy costs. You must give your case trustee documentation of your actual expenses, and you must show that the additional amount claimed is reasonable and necessary. 29. Education expenses for dependent children who are younger than 18. The monthly expenses (not more than \$0.00 \$160.42* per child) that you pay for your dependent children who are younger than 18 years old to attend a private or public elementary or secondary school. You must give your case trustee documentation of your actual expenses, and you must explain why the amount claimed is reasonable and necessary and not already accounted for in lines 6-23. * Subject to adjustment on 4/01/19, and every 3 years after that for cases begun on or after the date of adjustment. 30. Additional food and clothing expense. The monthly amount by which your actual food and clothing expenses are higher than the combined food and clothing allowances in the IRS National Standards. That amount cannot be more than 5% of the food and clothing allowances in the IRS National Standards. To find a chart showing the maximum additional allowance, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office. You must show that the additional amount claimed is reasonable and necessary. 31. Continuing charitable contributions. The amount that you will continue to contribute in the form of cash or financial \$400.00

instruments to a religious or charitable organization. 26 U.S.C. § 170(c)(1)-(2).

| Debto | | Walter Dean Mar Carol Joan Marth | | | | Case nu | umber (if known) | | |
|-------|----------|--|--|--------------------------------|-------------------------------------|---------------|------------------------|-----------------|------------|
| 32. | | all of the additional ones 25 though 31. | expense deductions. | | | | | | \$1,054.60 |
| Ded | luction | s for Debt Payment | | | | | | | |
| 33. | | | ed by an interest in p debt, fill in lines 33a | | wn, including | home n | nortgages, vehic | cle | |
| | | | age monthly payment, e for bankruptcy. The | | at are contract | ually du | e to each secure | d creditor in | |
| | | | | | | | erage monthly yment | | |
| | | Mortgages on your | | | | | #0.00 | | |
| | 33a. | Copy line 9b here | | | | → | \$0.00 | | |
| | | Loans on your firs | t two vehicles: | | | | | | |
| | 33b. | Copy line 13b here. | | | | → | \$705.79 | | |
| | 33c. | Copy line 13e here. | | | | | \$0.00 | | |
| | 33d. | List other secured d | ebts: | | | | | | |
| | | e of each creditor fo secured debt | | y property that es the debt | Does pay include to insurance | axes or | | | |
| | | | | | | No Yes | | | |
| | | | | | — <u>-</u> | No Yes | | | |
| | | | | | | No + | | | |
| | | | | | | Yes • | | | |
| | 33e. | Total average month | nly payment. Add line | s 33a through 33d. | | | \$705.79 | Copy total here | \$705.79 |
| 34. | | | sted in line 33 secure ort or the support of | | | | , or other prope | rty | |
| | ш. | payments liste | unt that you must pay d in line 33, to keep po nt). Next, divide by 60 | ossession of your p | roperty (called | | | | |
| Nan | ne of th | ne creditor | Identify property the secures the debt | nat Total amou | | | Monthly cure amount | | |
| | | | | | ÷6 | 60 = | | | |
| | | | | | ÷(| 60 = | | | |
| _ | | | | | ÷6 | 60 = + | | | |
| | | | | | Т | otal | \$0.00 | Copy total here | \$0.00 |

| Debto Debto | | | alter Dean Marth rol Joan Marth | Case nu | ımber (if known) | | |
|----------------|--------|-------------|--|-----------|------------------|-----------------|---------------------------|
| 35. | alim | ony | we any priority claims such as a priority tax, child support, or - that are past due as of the filing date of your bankruptcy case? § 507. | | | | |
| | ш. | No. Yes. | Go to line 36. Fill in the total amount of all of these priority claims. Do not include current or ongoing priority claims, such as those you listed in line 19. | | | | |
| | | | Total amount of all past-due priority claims | | \$3,500.00 | ÷ 60 = | \$58.33 |
| 36. | For n | nore i | eligible to file a case under Chapter 13? 11 U.S.C. § 109(e). information, go online using the link for Bankruptcy Basics specified in as for this form. Bankruptcy Basics may also be available at the bankruptcy. | • | | | |
| | ب | No. Yes. | Go to line 37. Fill in the following information. | | | | |
| | | | Projected monthly plan payment if you were filing under Chapter 13 | | | | |
| | | | Current multiplier for your district as stated on the list issued by the Administrative Office of the United States Courts (for districts in Alab and North Carolina) or by the Executive Office for United States Trus (for all other districts). | | X S | 6 | |
| | | | To find a list of district multipliers that includes your district, go online the link specified in the separate instructions for this form. This list malso be available at the bankruptcy clerk's office. | • | | | |
| | | | Average monthly administrative expense if you were filing under Cha | apter 13 | | Copy total here | |
| 37. | | | f the deductions for debt payment. 33e through 36. | | | | \$764.12 |
| Tota | al Ded | ductio | ons from Income | | | | |
| 38. | Add | all of | the allowed deductions. | | | | |
| | | | 24, All of the expenses allowed under IRS allowances | | | | |
| | Сору | / line : | 32, All of the additional expense deductions \$1,054.60 | | | | |
| | Сору | / line : | 37, All of the deductions for debt payment+\$764.12 | | | | |
| | Total | l dedu | | opy total | here → | | \$6,780.72 |
| Par | rt 3: | D | etermine Whether There Is a Presumption of Abuse | | | | |
| 39. | Calc | ulate | monthly disposable income for 60 months | | | | |
| | 39a. | Cop | py line 4, adjusted current monthly income \$5,520.77 | | | | |
| | 39b. | Cop | py line 38, <i>Total deductions</i> – \$6,780.72 | | | | |
| | 39c. | | nthly disposable income. 11 U.S.C. § 707(b)(2). (\$1,259.95) her otract line 39b from line 39a. | | (\$1,259.95) | | |
| | | For | the next 60 months (5 years) | | x 60 | | |
| | 39d. | Tot | tal. Multiply line 39c by 60 | 304 | (\$75,597.00) | Copy | (\$75,597.00) |
| | oou. | . 00 | | ooa. | 1,7 1,71111111 | here → | \ |

| ebto ebto | | | Iter Dean Marth ol Joan Marth Case | number (if known) | | | |
|--------------|----------|--|--|--|--|--|--|
| 40. | Find | d out w | whether there is a presumption of abuse. Check the box that applies: | | | | |
| | | The line 39d is less than \$7,700*. On the top of page 1 of this form, check box 1, There is no presumption of abuse. Go to Part 5. | | | | | |
| | | | ine 39d is more than \$12,850*. On the top of page 1 of this form, check box nay fill out Part 4 if you claim special circumstances. Then go to Part 5. | 2, There is a presumption of abuse. | | | |
| | | The li | ine 39d is at least \$7,700*, but not more than \$12,850*. Go to line 41. | | | | |
| | | * Sub | ject to adjustment on 4/01/19, and every 3 years after that for cases filed on o | or after the date of adjustment. | | | |
| 41. | 41a. | A S | in the amount of your total nonpriority unsecured debt. If you filled out ummary of Your Assets and Liabilities and Certain Statistical Information Schicial Form 106Sum), you may refer to line 3b on that form | | | | |
| | | | | x .25 | | | |
| | 41b. | | of your total nonpriority unsecured debt. 11 U.S.C. \S 707(b)(2)(A)(i)(I). tiply line 41a by 0.25. | Copy here | | | |
| 42. | is e | nough | whether the income you have left over after subtracting all allowed ded to pay 25% of your unsecured, nonpriority debt. box that applies: | uctions | | | |
| | | | 39d is less than line 41b. On the top of page 1 of this form, check box 1, <i>Th</i> Part 5. | nere is no presumption of abuse. | | | |
| | | | 39d is equal to or more than line 41b. On the top of page 1 of this form, chap fill out Part 4 if you claim special circumstances. Then go to Part 5. | eck box 2, There is a presumption of abuse. | | | |
| Par | t 4: | G | ive Details About Special Circumstances | | | | |
| 43. | - | | ove any special circumstances that justify additional expenses or adjustrate is no reasonable alternative? 11 U.S.C. § 707(b)(2)(B). | nents of current monthly income for | | | |
| | V | No. | Go to Part 5. | | | | |
| | | Yes. | Fill in the following information. All figures should reflect your average mont for each item. You may include expenses you listed in line 25. | thly expense or income adjustment | | | |
| | | | You must give a detailed explanation of the special circumstances that mak adjustments necessary and reasonable. You must also give your case trust expenses or income adjustments. | • | | | |
| | | | Give a detailed explanation of the special circumstances | Average monthly expense or income adjustment | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |

| Debtor 1 Debtor 2 | Carol Joan Marth | Case number (if known) |
|----------------------|--|---|
| Part 5: | Sign Below | |
| By s | igning here, I declare under penalty of perjury th | hat the information on this statement and in any attachments is true and correct. |
| X / | s/ Walter Dean Marth | χ /s/ Carol Joan Marth |
| V | Valter Dean Marth, Debtor 1 | Carol Joan Marth, Debtor 2 |
| | Date 2/4/2019 | Date 2/4/2019 |
| | Date 2/4/2019 | Date 2/4/2019 |

Current Monthly Income Calculation Details

In re: Walter Dean Marth Carol Joan Marth Chapter: 7

9. Pension and retirement income.

| Debtor or Spouse's Income | Description (if | available) | | | | | |
|---------------------------|----------------------------|---------------------------|--------------------|--------------------|--------------------|---------------|----------------------|
| | 6 Months Ago | 5 Months Ago | 4 Months Ago | 3 Months Ago | 2 Months Ago | Last Month | Avg. Per Month |
| <u>Debtor</u> | Concordia Pl \$2,288.82 | an Services \$2,288.82 | \$2,288.82 | \$2,288.82 | \$2,288.82 | \$2,288.82 | \$2,288.82 |
| Spouse | TRS \$3,231.95 | \$3,231.95 | \$3,231.95 | \$3,231.95 | \$3,231.95 | \$3,231.95 | \$3,231.95 |

Underlying Allowances (as of 02/04/2019)

In re: Walter Dean Marth Carol Joan Marth Case Number: Chapter:

| Median Income Information | | | | |
|--------------------------------------|-------------|--|--|--|
| State of Residence | Texas | | | |
| Household Size | 2 | | | |
| Median Income per Census Bureau Data | \$63,869.00 | | | |

| National Standards: Food, Clothing, Household Supplies, Personal Care, and Miscellaneous | | | | |
|--|----------------|--|--|--|
| Region | US | | | |
| Family Size | 2 | | | |
| Gross Monthly Income | \$5,520.77 | | | |
| Income Level | Not Applicable | | | |
| Food | \$646.00 | | | |
| Housekeeping Supplies | \$64.00 | | | |
| Apparel and Services | \$142.00 | | | |
| Personal Care Products and Services | \$69.00 | | | |
| Miscellaneous | \$281.00 | | | |
| Additional Allowance for Family Size Greater Than 4 | \$0.00 | | | |
| Total | \$1,202.00 | | | |

| National Standards: Health Care (only applies to cases filed on or after 1/1/08) | | | |
|--|----------|--|--|
| Household members under 65 years of age | | | |
| Allowance per member | \$52.00 | | |
| Number of members 0 | | | |
| Subtotal | \$0.00 | | |
| Household members 65 years of age or older | | | |
| Allowance per member \$114.00 | | | |
| Number of members 2 | | | |
| Subtotal \$228.00 | | | |
| Total | \$228.00 | | |

| Local Standards: Housing and Utilities | | | |
|---|---------------|--|--|
| State Name | Texas | | |
| County or City Name | Travis County | | |
| Family Size | Family of 2 | | |
| Non-Mortgage Expenses | \$575.00 | | |
| Mortgage/Rent Expense Allowance | \$1,489.00 | | |
| Minus Average Monthly Payment for Debts Secured by Home | \$0.00 | | |
| Equals Net Mortgage/Rental Expense | \$1,489.00 | | |
| Housing and Utilities Adjustment | \$0.00 | | |

Underlying Allowances (as of 02/04/2019)

In re: Walter Dean Marth Case Number:
Carol Joan Marth Chapter: 7

| Local Standards: Transportation; Vehicle Operation/Public Transportation | | | | |
|--|-----------------------------|---------------------|--------------------------|--|
| Transportation Region | | South Region | South Region | |
| Number of Vehicles Operated | | 1 | 1 | |
| Allowance | | \$196.00 | \$196.00 | |
| Loc | al Standards: Transportatio | n; Additional Publi | c Transportation Expense | |
| Transportation Region | | South Region | South Region | |
| Allowance (if entitled) | | \$178.00 | \$178.00 | |
| Amount Claimed | | \$0.00 | \$0.00 | |
| | Local Standards: Trans | portation; Ownersh | nip/Lease Expense | |
| Transportation Region | | South Region | South Region | |
| Number of Vehicles with Ownership/Lease Expense | | 1 | | |
| First Car | | · | Second Car | |
| Allowance | \$497.00 | | | |
| Minus Average Monthly Payment for Debts Secured by Vehicle | \$705.79 | | | |
| Equals Net Ownership / Lease Expense | \$0.00 | | | |